

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

IOWA DEMOCRATIC PARTY

ADDRESS (number and street)

5661 Fleur Drive

☐Check if different
than previously
reported. (ACC)

Des Moines

IA

50321

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00035600

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2004

through

07

31

2004

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Ken Sagar

Signature of Treasurer

Electronically Filed by Ken Sagar

Date

07

19

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

| | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
IOWA DEMOCRATIC PARTY

Report Covering the Period:

From:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 4 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 3 | 1 | 2 | 0 | 0 | 4 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 Y Y Y Y 2004 | | 166393.81 |
| (b) Cash on Hand at Beginning of Reporting Period | 266784.27 | |
| (c) Total Receipts (from Line 19) | 190205.10 | 1179108.45 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 456989.37 | 1345502.26 |
| 7. Total Disbursements (from Line 31) | 330254.67 | 1218767.56 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 126734.70 | 126734.70 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 1200.00 | |

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

IOWA DEMOCRATIC PARTY

Report Covering the Period:

From:

M M
0 7D D
0 1Y Y Y Y
2 0 0 4

To:

M M
0 7D D
3 1Y Y Y Y
2 0 0 4

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | 47681.00 | 306032.17 |
| (i) Itemized (use Schedule A) | 22150.63 | 272089.52 |
| (ii) Unitemized | 69831.63 | 578121.69 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) ➤ | 0.00 | 0.00 |
| (b) Political Party Committees | 8001.00 | 86114.24 |
| (c) Other Political Committees (such as PACs) | 77832.63 | 664235.93 |
| (d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤ | | |
| 12. Transfers From Affiliated/Other Party Committees | 99093.40 | 249665.45 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 757.96 | 3675.06 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 7821.11 | 155677.23 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 4700.00 | 105854.78 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 4700.00 | 105854.78 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 190205.10 | 1179108.45 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 185505.10 | 1073253.67 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 9384.20 | 118523.40 |
| (ii) Non-Federal Share..... | 16683.13 | 209238.64 |
| (b) Other Federal Operating Expenditures..... | 1270.58 | 38334.89 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡ | 27337.91 | 366096.93 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 2565.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 17000.00 | 19500.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 17000.00 | 19500.00 |
| 29. Other Disbursements..... | 40250.97 | 452185.90 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 717.02 |
| (ii) "Levin" Share | 0.00 | 1274.72 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 245665.79 | 376427.99 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 245665.79 | 378419.73 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 330254.67 | 1218767.56 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 313571.54 | 1008254.20 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 77832.63 | 664235.93 |
| 34. Total Contribution Refunds (from Line 28(d)) | 17000.00 | 19500.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 60832.63 | 644735.93 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 10654.78 | 156858.29 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 757.96 | 3675.06 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 9896.82 | 153183.23 |

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Carl Marvin McPherson

Mailing Address 1537 21st St

City State Zip Code
 Des Moines IA 50311-3211

FEC ID number of contributing federal political committee.

C

Name of Employer
Wells FargoOccupation
Mortgage Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 7 / 2 0 0 4

Transaction ID: C3420

Amount of Each Receipt this Period

120.00

B. Full Name (Last, First, Middle Initial)

Carl Marvin McPherson

Mailing Address 1537 21st St

City State Zip Code
 Des Moines IA 50311-3211

FEC ID number of contributing federal political committee.

C

Name of Employer
Wells FargoOccupation
Mortgage Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 2 / 2 0 0 4

Transaction ID: C3421

Amount of Each Receipt this Period

20.00

C. Full Name (Last, First, Middle Initial)

Lisa K Heddens

Mailing Address 4541 513th Ave

City State Zip Code
 Ames IA 50014-9035

FEC ID number of contributing federal political committee.

C

Name of Employer
State of IowaOccupation
State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 9 / 2 0 0 4

Transaction ID: C3338

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Sally R Olsen
Mailing Address 1750 34th St SE

City State Zip Code
Cedar Rapids IA 52403-3710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info requested

Occupation
Info requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 18 / 2004

Transaction ID: C3443

Amount of Each Receipt this Period

400.00

B. Full Name (Last, First, Middle Initial)
Ms. Jean Hall Lloyd-Jones
Mailing Address 160 Oakridge Ave

City State Zip Code
Iowa City IA 52246-2935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2004

Transaction ID: C3391

Amount of Each Receipt this Period

750.00

C. Full Name (Last, First, Middle Initial)
Brent Calvin Wynja
Mailing Address 1012 Hunziker Dr

City State Zip Code
Ames IA 50010-5028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solomon, Smith, Barney

Occupation
VP-Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 07 / 2004

Transaction ID: C3542

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 / 174

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

| | | |
|---|--|---|
| A. Full Name (Last, First, Middle Initial) Richard James Varn | | Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 3 / 2 0 0 4 |
| Mailing Address 620 42nd St | | Transaction ID: C3531 |
| City Des Moines | State IA | Zip Code 50312-2732 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 240.00 |
| Name of Employer State of Iowa | Occupation Technology and Policy Consultant | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|-------------------------------------|---|
| B. Full Name (Last, First, Middle Initial) Gerald David Hurd | | Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 4 / 2 0 0 4 |
| Mailing Address 300 Walnut Street Unit 183 | | Transaction ID: C3354 |
| City Des Moines | State IA | Zip Code 50309-2244 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 100.00 |
| Name of Employer Retired | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 4597.67 | |

| | | |
|---|-------------------------------------|---|
| C. Full Name (Last, First, Middle Initial) Gerald David Hurd | | Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 3 0 / 2 0 0 4 |
| Mailing Address 300 Walnut Street Unit 183 | | Transaction ID: C3355 |
| City Des Moines | State IA | Zip Code 50309-2244 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 417.00 |
| Name of Employer Retired | Occupation Retired | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 4597.67 | |

SUBTOTAL of Receipts This Page (optional)

757.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Udaya Kabadi

Mailing Address 77 Donegal Pl

City State Zip Code
 Iowa City IA 52246-2787

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Iowa

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 4

Transaction ID: C3370

Amount of Each Receipt this Period

1250.00

B. Full Name (Last, First, Middle Initial)

Janet Griffin

Mailing Address 410 27th St

City State Zip Code
 Des Moines IA 50312-5404

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wellmark

Occupation
Vice-President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 9 / 2 0 0 4

Transaction ID: C3317

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Liz Louise Seiser

Mailing Address 2613 33rd St

City State Zip Code
 Des Moines IA 50310-5108

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
Board Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 1 / 2 0 0 4

Transaction ID: C3496

Amount of Each Receipt this Period

830.00

SUBTOTAL of Receipts This Page (optional)

2330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Patricia J Brown

Mailing Address 3212 West St

City State Zip Code
Ames IA 50014-3537

FEC ID number of contributing
federal political committee.

C

Name of Employer
 State Farm Insurance

Occupation
 Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 0 4

Transaction ID: C3220

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
 Joanne M Oldson

Mailing Address 418 38th Pl

City State Zip Code
Des Moines IA 50312-2804

FEC ID number of contributing
federal political committee.

C

Name of Employer
 State of Iowa

Occupation
 State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 4

Transaction ID: C3442

Amount of Each Receipt this Period

1200.00

C. Full Name (Last, First, Middle Initial)
 Barbara A Hurd

Mailing Address 300 Walnut St
 Unit 183

City State Zip Code
Des Moines IA 50309-2244

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 4

Transaction ID: C3353

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)

11300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Eric J Sams

Mailing Address 812 57th St

City State Zip Code
West Des Moines IA 50266-7234

FEC ID number of contributing
federal political committee.

C

Name of Employer
Info requested

Occupation
Info requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 26 2004

Transaction ID: C3488

Amount of Each Receipt this Period

250.00

B. Full Name (Last, First, Middle Initial)
Ann Hutchinson

Mailing Address 3035 Quail Ridge Road

City State Zip Code
Bettendorf IA 52722-5334

FEC ID number of contributing
federal political committee.

C

Name of Employer
Eastern Iowa Community Co-
llege

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y
07 30 2004

Transaction ID: C3357

Amount of Each Receipt this Period

104.00

C. Full Name (Last, First, Middle Initial)
Roxanne B Conlin

Mailing Address 2900 Southern Hills Circle

City State Zip Code
Des Moines IA 50321-1458

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.00

Date of Receipt

M M / D D / Y Y Y Y
07 30 2004

Transaction ID: C3246

Amount of Each Receipt this Period

417.00

SUBTOTAL of Receipts This Page (optional)

771.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Margaret P Borgen

Mailing Address 2504 Forest Dr

City State Zip Code
Des Moines IA 50312-5410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C3211

Amount of Each Receipt this Period

30.00

B. Full Name (Last, First, Middle Initial)

Stanley Richards

Mailing Address 3000 SW 37th St

City State Zip Code
Des Moines IA 50321-1330

FEC ID number of contributing
federal political committee.

C

Name of Employer
General Growth Co

Occupation
General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 4

Transaction ID: C3477

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

James Leo Coffey

Mailing Address 3203 1st St
Apt 209

City State Zip Code
Emmetsburg IA 50536-2521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C3243

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 174

(check only one)

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
James Leo CoffeyMailing Address 3203 1st St
Apt 209City State Zip Code
Emmetsburg IA 50536-2521FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 3 | | 2 | 0 | 0 | 4 |

Transaction ID: C3244

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
Leslie Osam Pensack

Mailing Address 317 S Wilmoth Ave

City State Zip Code
Ames IA 50014-7569FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 7 | | 2 | 0 | 0 | 4 |

Transaction ID: C3457

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
Thomas James Duff

Mailing Address 2501 35th St

City State Zip Code
Des Moines IA 50310-4552FEC ID number of contributing
federal political committee.

C

Name of Employer
Conlin and AssociatesOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 1 | 3 | | 2 | 0 | 0 | 4 |

Transaction ID: C3270

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Alfredo G Parrish

Mailing Address 17 32nd Place

City State Zip Code
Des Moines IA 50312-4522

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parrish Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.00

Date of Receipt

M M / D D / Y Y Y Y
07 30 2004

Transaction ID: C3452

Amount of Each Receipt this Period

413.00

Full Name (Last, First, Middle Initial)

B. Jan L Flora

Mailing Address 1902 George Allen Ave

City State Zip Code
Ames IA 50010-5524

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa State University

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
07 17 2004

Transaction ID: C3290

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mrs Gertrude Macqueen

Mailing Address 454 Lexington Ave

City State Zip Code
Iowa City IA 52246-2417

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y
07 30 2004

Transaction ID: C3401

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

963.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

| | | |
|---|--|---|
| A. Full Name (Last, First, Middle Initial) Ronnie Podolefsky Mailing Address 8206 Buckridge Rd City Cedar Falls State IA Zip Code 50613 FEC ID number of contributing federal political committee. C Name of Employer Frericu Law Firm Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00 | | Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 4 Transaction ID: C3467 Amount of Each Receipt this Period 250.00 |
| B. Full Name (Last, First, Middle Initial) John Richard Clem Mailing Address 2307 Timberland Rd City Ames State IA Zip Code 50014-8251 FEC ID number of contributing federal political committee. C Name of Employer Iowa State University Occupation Physicist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00 | | Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 0 / 2 0 0 4 Transaction ID: C3242 Amount of Each Receipt this Period 100.00 |
| C. Full Name (Last, First, Middle Initial) Kathryn E Gammack Mailing Address 1607 Thornwood Rd City West Des Moines State IA Zip Code 50265-5341 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00 | | Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 4 Transaction ID: C3301 Amount of Each Receipt this Period 500.00 |

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Dr. David Edwin Drake

Mailing Address 649 Polk Blvd

City State Zip Code
 Des Moines IA 50312-2350

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 4

Transaction ID: C3265

Amount of Each Receipt this Period

750.00

B. Full Name (Last, First, Middle Initial)

Gerald E Klonglan

Mailing Address 1622 Maxwell Ave

City State Zip Code
 Ames IA 50010-5536

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 5 / 2 0 0 4

Transaction ID: C3378

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Mary Anna Gaskill

Mailing Address 509 E 4th St

City State Zip Code
 Ottumwa IA 52501-3011

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 9 / 2 0 0 4

Transaction ID: C3305

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) Sally Du Bray Mailing Address 3660 Grand Ave Unit 720 City Des Moines State IA Zip Code 50312-4355 FEC ID number of contributing federal political committee. C Name of Employer Info requested Occupation Info requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00 | | Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 4 Transaction ID: C3266 Amount of Each Receipt this Period 400.00 |
| B. Full Name (Last, First, Middle Initial) Alex Cooney Mailing Address 715 50th St City Des Moines State IA Zip Code 50312-1809 FEC ID number of contributing federal political committee. C Name of Employer Student Occupation Student Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00 | | Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 4 Transaction ID: C3560 Amount of Each Receipt this Period 250.00 |
| C. Full Name (Last, First, Middle Initial) Georgia Helmick Mailing Address 300 Walnut - No 75 City Des Moines State IA Zip Code 50309 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00 | | Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 4 Transaction ID: C3340 Amount of Each Receipt this Period 500.00 |

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Georgia Helmick

Mailing Address 300 Walnut - No 75

City State Zip Code
Des Moines IA 50309

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
07 09 2004

Transaction ID: C3341

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)
 William J Gannon

Mailing Address PO Box 167
 205 E Bluff St

City State Zip Code
Mingo IA 50168-0167

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1487.00

Date of Receipt

M M / D D / Y Y Y Y
07 15 2004

Transaction ID: C3303

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
 Leigh Spears Tesfatsion

Mailing Address 1002 Jarrett Cir

City State Zip Code
Ames IA 50014-3937

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Iowa State University

Occupation
 Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
07 17 2004

Transaction ID: C3523

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Kay Jeane Riley

Mailing Address 2910 Cayuga Pt

City State Zip Code
 Des Moines IA 50321-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 4

Transaction ID: C3478

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
 Arden Lee Borgen

Mailing Address 2504 Forest Dr

City State Zip Code
 Des Moines IA 50312-5410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Borgen Systems Inc

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 9 / 2 0 0 4

Transaction ID: C3210

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)
 Timothy J Walker

Mailing Address 317 6th Ave
 Ste 1200

City State Zip Code
 Des Moines IA 50309-4112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Whitfield & Eddy

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 2 / 2 0 0 4

Transaction ID: C3532

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

3100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Judith Anne Hoffman

Mailing Address 3820 Quebec St

City State Zip Code
Ames IA 50014-3863

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Red Cross, LWU, Iowa Read-
 ing Assoc

Occupation
 Contract Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.00

Date of Receipt

M M / D D / Y Y Y Y
07 08 2004

Transaction ID: C3345

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Judith Anne Hoffman

Mailing Address 3820 Quebec St

City State Zip Code
Ames IA 50014-3863

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Red Cross, LWU, Iowa Read-
 ing Assoc

Occupation
 Contract Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.00

Date of Receipt

M M / D D / Y Y Y Y
07 17 2004

Transaction ID: C3346

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Florence D Buhr

Mailing Address 4127 30th St

City State Zip Code
Des Moines IA 50310-5946

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
07 30 2004

Transaction ID: C3223

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

890.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 174

(check only one)

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Mary Lee Weaver

Mailing Address 1805 B Ave

| | | |
|--------|-------|------------|
| City | State | Zip Code |
| Rippey | IA | 50235-7503 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Rural Health Activist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 1 | 5 | | 2 | 0 | 0 | 4 |

Transaction ID: C3533

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)

Cynthia P Eisenhower

Mailing Address 710 NW Ash Dr

| | | |
|--------|-------|------------|
| City | State | Zip Code |
| Ankeny | IA | 50023-1549 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of IowaOccupation
Director of Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 3 | | 2 | 0 | 0 | 4 |

Transaction ID: C3277

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Lee H Gaudineer, JR

Mailing Address 4520 51st St

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Des Moines | IA | 50310-2938 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gaudineer, Comito, GeorgeOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 6 | | 2 | 0 | 0 | 4 |

Transaction ID: C3306

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Lee H Gaudineer, JR

Mailing Address 4520 51st St

City State Zip Code
Des Moines IA 50310-2938

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gaudineer, Cornito, George

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 1 / 2 0 0 4

Transaction ID: C3307

Amount of Each Receipt this Period

600.00

B. Full Name (Last, First, Middle Initial)

Margaret S Johnson

Mailing Address 608 Hodge Ave

City State Zip Code
Ames IA 50010-5916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 3 / 2 0 0 4

Transaction ID: C3367

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Bonnie Jean Campbell

Mailing Address 3131 Fleur Dr
Apt 702

City State Zip Code
Des Moines IA 50321-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1051.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 4

Transaction ID: C3233

Amount of Each Receipt this Period

51.00

SUBTOTAL of Receipts This Page (optional)

751.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Mary Patricia Maloney
Mailing Address 3415 Witmer Pkwy

City State Zip Code
Des Moines IA 50310-4434

FEC ID number of contributing
federal political committee.

C

Name of Employer
Polk County IA

Occupation
Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 0 4

Transaction ID: C3403

Amount of Each Receipt this Period

60.00

B. Full Name (Last, First, Middle Initial)
James W Carney
Mailing Address 303 Locust St
400 Homestead Building

City State Zip Code
Des Moines IA 50309-1762

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carney, Appleby, Nielsen &
Skinner

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 0 / 2 0 0 4

Transaction ID: C3238

Amount of Each Receipt this Period

750.00

C. Full Name (Last, First, Middle Initial)
Robert E Mannheimer
Mailing Address 3663 Grand Ave
Unit 504

City State Zip Code
Des Moines IA 50312-4342

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 7 / 2 0 0 4

Transaction ID: C3404

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

910.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Margo L McNabb

Mailing Address 1232 Wisconsin Ave

City State Zip Code
 Ames IA 50014-3973

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 7 / 2 0 0 4

Transaction ID: C3410

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)

Robert E Dvorsky

Mailing Address 412 6th Street

City State Zip Code
 Coralville IA 52241-2511

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 0 / 2 0 0 4

Transaction ID: C3273

Amount of Each Receipt this Period

67.00

C. Full Name (Last, First, Middle Initial)

Roger F Wendt

Mailing Address 2313 Seneca Way

City State Zip Code
 Sioux City IA 51104-1502

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of Iowa

Occupation
State Representative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

932.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 1 / 2 0 0 4

Transaction ID: C3536

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

767.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 174

(check only one)

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Martha Anne Easter-Wells

Mailing Address 22905 Great River Rd

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Le Claire | IA | 52753 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Fundraising consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 9 | | 2 | 0 | 0 | 4 |

Transaction ID: C3275

Amount of Each Receipt this Period

150.00

B. Full Name (Last, First, Middle Initial)
Joseph A Cacciatore

Mailing Address 4410 Amick Ave

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Des Moines | IA | 50310-3235 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dickinson Law FirmOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 0 | 1 | | 2 | 0 | 0 | 4 |

Transaction ID: C3230

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Suzan Kelsey Brooks

Mailing Address 600 34th St

| | | |
|-----------------|-------|------------|
| City | State | Zip Code |
| West Des Moines | IA | 50265-3130 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 9 | | 2 | 0 | 0 | 4 |

Transaction ID: C3219

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Phyllis Henry

Mailing Address 1164 Aa Ave

City State Zip Code
 Gladbrook IA 50635-9366

FEC ID number of contributing
federal political committee.

C

Name of Employer
Commonwealth Reporting

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1310.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 4 / 2 0 0 4

Transaction ID: C3342

Amount of Each Receipt this Period

1250.00

B. Full Name (Last, First, Middle Initial)

Naomi Schedl

Mailing Address 625 Whiting Ave

City State Zip Code
 Iowa City IA 52245-5641

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 6 / 2 0 0 4

Transaction ID: C3490

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)

Dennis Groenenboom

Mailing Address 1134 38th St

City State Zip Code
 Des Moines IA 50311-3621

FEC ID number of contributing
federal political committee.

C

Name of Employer
Legal Services of Iowa

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 1 / 2 0 0 4

Transaction ID: C3318

Amount of Each Receipt this Period

240.00

SUBTOTAL of Receipts This Page (optional)

1790.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Mary K Kelly

Mailing Address 314 43rd St

City State Zip Code
Des Moines IA 50312-2532

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self

Occupation
 Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
07 09 2004

Transaction ID: C3373

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
 Thomas R Patterson

Mailing Address 6550 Center St

City State Zip Code
Des Moines IA 50312-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer
 State of Iowa

Occupation
 Research Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1701.00

Date of Receipt

M M / D D / Y Y Y Y
07 13 2004

Transaction ID: C3454

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
 Herman C Quirnbach

Mailing Address 1002 Jarrett Cir

City State Zip Code
Ames IA 50014-3937

FEC ID number of contributing
federal political committee.

C

Name of Employer
 State of Iowa

Occupation
 State Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

M M / D D / Y Y Y Y
07 17 2004

Transaction ID: C3471

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

3800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 John D Forsyth
 Mailing Address 2433 Jordan Trl

City State Zip Code
West Des Moines IA 50265-5549

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Wellmark

Occupation
 CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 1 / 2 0 0 4

Transaction ID: C3292

Amount of Each Receipt this Period

1500.00

B. Full Name (Last, First, Middle Initial)
 Jackie Goettsch
 Mailing Address 13565 Village Ct

City State Zip Code
Clive IA 50325-8510

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 3 / 2 0 0 4

Transaction ID: C3312

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
 Douglas K Finnemore
 Mailing Address 3312 Oakland St

City State Zip Code
Ames IA 50014-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Retired

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 8 / 2 0 0 4

Transaction ID: C3286

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

2200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Douglas K Finnmere
Mailing Address 3312 Oakland St

City State Zip Code
Ames IA 50014-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 4

Transaction ID: C3287

Amount of Each Receipt this Period

200.00

B. Full Name (Last, First, Middle Initial)
Carter Printing
Mailing Address 1739 E Grand Ave

City State Zip Code
Des Moines IA 50316-3611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 4

Transaction ID: C3559

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Dr. Julianne Hilda Thomas
Mailing Address 4749 Mount Vernon Rd SE

City State Zip Code
Cedar Rapids IA 52403-3941

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 6 / 2 0 0 4

Transaction ID: C3525

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)

3450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 30 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Connie P Wimer

Mailing Address 100 4th St

City State Zip Code
 Des Moines IA 50309-4742

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Business Publications

Occupation
 Publisher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 0 / 2 0 0 4

Transaction ID: C3538

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)
 Marc Harding

Mailing Address 3211 Lincoln Place Dr

City State Zip Code
 Des Moines IA 50312-3003

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Harding Law Office

Occupation
 Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1151.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 4 / 2 0 0 4

Transaction ID: C3334

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
 Thomas M Larkin

Mailing Address 1401 13th St

City State Zip Code
 Coralville IA 52241-1307

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Senator Tom Harkin

Occupation
 Staff Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 2 / 2 0 0 4

Transaction ID: C3386

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

2900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 31 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Fred Lorber

Mailing Address 5 SW 52nd St

City State Zip Code
 Des Moines IA 50312-2143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 5 / 2 0 0 4

Transaction ID: C3393

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)

Daniel Sterenchuk

Mailing Address 4206 Vine Ave SE

City State Zip Code
 Cedar Rapids IA 52403-4364

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kirkwood Community College

Occupation
Training and Operations Mng

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 9 / 2 0 0 4

Transaction ID: C3511

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

Dennis M Mc Carthy

Mailing Address 4915 Schubert St

City State Zip Code
 Ames IA 50014-7714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 1 1 / 2 0 0 4

Transaction ID: C3409

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Robert Bradley Skinner
Mailing Address 1810 Andrews Dr

City State Zip Code
Pleasant Hill IA 50327-0910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Skinner Law Firm

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2919.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 0 / 2 0 0 4

Transaction ID: C3500

Amount of Each Receipt this Period

417.00

B. Full Name (Last, First, Middle Initial)
Thomas A Palmer
Mailing Address 4090 Westown Pwy Suite E

City State Zip Code
West Des Moines IA 50266

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lawyer, Dougherty, Palmer
& Flansb

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 0 4

Transaction ID: C3448

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
Sandra E Quilty
Mailing Address 814 17th St

City State Zip Code
Des Moines IA 50314-1126

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Cancer Society

Occupation
Lobbyist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 9 / 2 0 0 4

Transaction ID: C3470

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

917.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Lowell Frederick Greimann

Mailing Address 1518 13th St

City State Zip Code
 Ames IA 50010-5206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa State University

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 0 2 / 2 0 0 4

Transaction ID: C3316

Amount of Each Receipt this Period

300.00

B. Full Name (Last, First, Middle Initial)

Charles Hughes Bruner

Mailing Address 1148 Oklahoma Dr

City State Zip Code
 Ames IA 50014-3045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Child and Family Policy
Center

Occupation
Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 6 / 2 0 0 4

Transaction ID: C3222

Amount of Each Receipt this Period

100.00

C. Full Name (Last, First, Middle Initial)

Link Strategies, LLC

Mailing Address 300 Walnut St
 Ste 5

City State Zip Code
 Des Moines IA 50309-2233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 2 1 / 2 0 0 4

Transaction ID: C3569

Amount of Each Receipt this Period

600.00

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 174

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Jeffrey John Link

Mailing Address 4129 Forest Ave

City State Zip Code
Des Moines IA 50311-2543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Link Strategies

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 1 / 2 0 0 4

Transaction ID: C79988

Amount of Each Receipt this Period

600.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

47681.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 174

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
PAUL JOHNSON FOR CONGRESS

Mailing Address **PO Box 475**

City State Zip Code
Decorah IA 52101-0475

FEC ID number of contributing
federal political committee. **C C00399774**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

07 / 09 / 2004

Transaction ID: C3548

Amount of Each Receipt this Period

5000.00

Transfer

B. Full Name (Last, First, Middle Initial)
Vitamvas for Iowa House

Mailing Address **PO Box 198**

City State Zip Code
Silver City IA 51571-0198

FEC ID number of contributing
federal political committee. **C**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

07 / 23 / 2004

Transaction ID: C3573

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
Kibbie for Senator

Mailing Address **PO Box 190**

City State Zip Code
Emmetsburg IA 50536-0318

FEC ID number of contributing
federal political committee. **C**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

07 / 06 / 2004

Transaction ID: C3568

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 174

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Waterman for State Senate

Mailing Address PO Box 273

City State Zip Code
Osceola IA 50213-0273

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 26 2004

Transaction ID: C3574

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dave Franker for Congress

Mailing Address PO Box 587

City State Zip Code
North Liberty IA 52317-0587

FEC ID number of contributing
federal political committee.

C C00391896

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
07 01 2004

Transaction ID: C3563

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Danielson for Senate

Mailing Address 3906 Monterey Drive

City State Zip Code
Waterloo IA 50701-3527

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 19 2004

Transaction ID: C3562

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Meredith Corporation Employees Fund for Better Government

Mailing Address 1716 Locust St

City State Zip Code
Des Moines IA 50309-3023

FEC ID number of contributing
federal political committee. **C** C00010520

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

51.00

Date of Receipt

M M / D D / Y Y Y Y
07 02 2004

Transaction ID: C3547

Amount of Each Receipt this Period

51.00

Full Name (Last, First, Middle Initial)

B. BOSWELL FOR CONGRESS

Mailing Address 224 S State St

City State Zip Code
Lamoni IA 50140-1328

FEC ID number of contributing
federal political committee. **C** C00316661

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
07 05 2004

Transaction ID: C3546

Amount of Each Receipt this Period

600.00

Transfer

Full Name (Last, First, Middle Initial)

C. United Food & Commercial Workers Active Ballot Club

Mailing Address 1775 K Street, NW

City State Zip Code
Washington DC 20006-1598

FEC ID number of contributing
federal political committee. **C** C00002766

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
07 01 2004

Transaction ID: C3549

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

851.00

TOTAL This Period (last page this line number only)

8001.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Democratic National Committee - State Victory Fund

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

108384.45

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 4 / 2 0 0 4

Transaction ID: C3550

Amount of Each Receipt this Period

48650.84

Full Name (Last, First, Middle Initial)

B. Democratic National Committee - State Victory Fund

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00010603

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

108384.45

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 4

Transaction ID: C3551

Amount of Each Receipt this Period

31442.56

Full Name (Last, First, Middle Initial)

C. DCC-5th District

Mailing Address 305 E 21st St

City State Zip Code
Atlantic IA 50022-2841

FEC ID number of contributing federal political committee. **C** C00372847

Name of Employer Occupation

Receipt For:

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 9 / 2 0 0 4

Transaction ID: C66568

Amount of Each Receipt this Period

4000.00

SUBTOTAL of Receipts This Page (optional)

84093.40

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 174

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Dollars for Democrats

Full Name (Last, First, Middle Initial)

Mailing Address 430 S Capitol St SE

City

Washington

State

DC

Zip Code

20003-4024

FEC ID number of contributing
federal political committee.

C C00073791

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

130000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 6 / 2 0 0 4

Transaction ID: C3552

Amount of Each Receipt this Period

15000.00

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

99093.40

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Iowa Committee on Political Education - AFL/CIO

Mailing Address 2000 Walker Street Ste A

City State Zip Code
Des Moines IA 50317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.39

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 2 / 2 0 0 4

Transaction ID: C3554

Amount of Each Receipt this Period

685.39

SUBTOTAL of Receipts This Page (optional)

685.39

TOTAL This Period (last page this line number only)

685.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 41 / 174

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Friends for Russ Wiesley
 Mailing Address 732 Dartmoor Dr

City State Zip Code
Wauke **IA** **50263-9708**

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / **01** / **2004**

Transaction ID: C3565

Amount of Each Receipt this Period

500.00

Voter File Purchase

B. Full Name (Last, First, Middle Initial)
 National Motor Club
 Mailing Address 6500 Beltline Rd - Suite 200

City State Zip Code
Irving **TX** **75063**

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3670.84

Date of Receipt

07 / **08** / **2004**

Transaction ID: C3570

Amount of Each Receipt this Period

486.36

C. Full Name (Last, First, Middle Initial)
 State of Iowa
 Mailing Address State Capitol

City State Zip Code
Des Moines **IA** **50319**

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

71555.27

Date of Receipt

07 / **05** / **2004**

Transaction ID: C3572

Amount of Each Receipt this Period

6834.75

SUBTOTAL of Receipts This Page (optional)

7821.11

TOTAL This Period (last page this line number only)

7821.11

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Bank charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1867

Date of Disbursement

07 / 01 / 2004

Amount of Each Disbursement this Period

24.65

Full Name (Last, First, Middle Initial)

B. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Credit card fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1870

Date of Disbursement

07 / 06 / 2004

Amount of Each Disbursement this Period

635.45

Full Name (Last, First, Middle Initial)

C. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Bank charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1871

Date of Disbursement

07 / 06 / 2004

Amount of Each Disbursement this Period

4.24

SUBTOTAL of Disbursements This Page (optional)

664.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement
NSF Charges - Fed

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D17392

Date of Disbursement

07 / 06 / 2004

Amount of Each Disbursement this Period

65.00

Full Name (Last, First, Middle Initial)

B. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement
Bank charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1935

Date of Disbursement

07 / 30 / 2004

Amount of Each Disbursement this Period

3.01

Full Name (Last, First, Middle Initial)

C. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement
Bank charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1936

Date of Disbursement

07 / 30 / 2004

Amount of Each Disbursement this Period

18.87

SUBTOTAL of Disbursements This Page (optional)

86.88

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Bank charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1937

Date of Disbursement

07 / 31 / 2004

Amount of Each Disbursement this Period

14.69

Full Name (Last, First, Middle Initial)

B. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Bank charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1939

Date of Disbursement

07 / 31 / 2004

Amount of Each Disbursement this Period

357.73

Full Name (Last, First, Middle Initial)

C. West Bank

Mailing Address PO Box 65020

City West Des Moines State IA Zip Code 50265-0020

Purpose of Disbursement

Bank charge

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1938

Date of Disbursement

07 / 31 / 2004

Amount of Each Disbursement this Period

104.19

SUBTOTAL of Disbursements This Page (optional)

476.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Suite 1

City Chicago State IL Zip Code 60679-0001

Purpose of Disbursement
Credit card fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1862

Date of Disbursement

/ /

Amount of Each Disbursement this Period

42.75

SUBTOTAL of Disbursements This Page (optional)

42.75

TOTAL This Period (last page this line number only)

1270.58

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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| | | | | | |
|------------------------------|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input checked="" type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|---------------------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) S. Daniel Daniel Abraham | | Transaction ID: D2247 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 3 | 0 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 3 | 0 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 777 S Flagler Dr FI 10 | | Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">10000.00</td> </tr> </table> | 10000.00 | | | | | | | | | | | | | | | | | | | |
| 10000.00 | | | | | | | | | | | | | | | | | | | | | | |
| City West Palm Beach | State FL | | Zip Code 33401-6161 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Refund of contribution per donor request | | | Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|---------------------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| B. Full Name (Last, First, Middle Initial) Doris Jean Newlin | | Transaction ID: D1945 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 2 | 7 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 2 | 7 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 3315 48th Pl | | Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">7000.00</td> </tr> </table> | 7000.00 | | | | | | | | | | | | | | | | | | | |
| 7000.00 | | | | | | | | | | | | | | | | | | | | | | |
| City Des Moines | State IA | | Zip Code 50310-2608 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Refund of NF contribution | | | Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

17000.00

TOTAL This Period (last page this line number only)

17000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|----------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Idp State | | Transaction ID: D17394 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 5 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 5 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 5661 Fleur Dr # NON-FEDERAL | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>3396.43</td> </tr> </table> | 3396.43 | | | | | | | | | | | | | | | | | | | |
| 3396.43 | | | | | | | | | | | | | | | | | | | | | | |
| City Des Moines State IA Zip Code 50321-2841 | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Transfer to Non-Federal for cash flow | | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Idp State | | Transaction ID: D26273 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 9 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 9 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 5661 Fleur Dr # NON-FEDERAL | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table> | 2500.00 | | | | | | | | | | | | | | | | | | | |
| 2500.00 | | | | | | | | | | | | | | | | | | | | | | |
| City Des Moines State IA Zip Code 50321-2841 | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Transfer to Non-Federal for cash flow | | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Idp State | | Transaction ID: D26272 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 9 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 9 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 5661 Fleur Dr # NON-FEDERAL | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>28150.00</td> </tr> </table> | 28150.00 | | | | | | | | | | | | | | | | | | | |
| 28150.00 | | | | | | | | | | | | | | | | | | | | | | |
| City Des Moines State IA Zip Code 50321-2841 | | | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Transfer to Non-Federal for cash flow | | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | <table border="1"> <tr> <td>34046.43</td> </tr> </table> | 34046.43 | | | | | | | | | | | | | | | | | | | |
| 34046.43 | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL This Period (last page this line number only) | | <table border="1"> <tr> <td></td> </tr> </table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Idp State

Mailing Address 5661 Fleur Dr
NON-FEDERAL

City State Zip Code
Des Moines IA 50321-2841

Purpose of Disbursement
Transfer to Non-Federal for cash flow

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D26274

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4700.00

SUBTOTAL of Disbursements This Page (optional)

4700.00

TOTAL This Period (last page this line number only)

38746.43

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Jesse Tangkpanya | | Transaction ID: D2030 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2604 Barlett Road | | Amount of Each Disbursement this Period <div>680.54</div> |
| City Iowa City State IA Zip Code 52246 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Jesse Tangkpanya | | Transaction ID: D2181 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2604 Barlett Road | | Amount of Each Disbursement this Period <div>531.71</div> |
| City Iowa City State IA Zip Code 52246 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Clint A Birkenholtz | | Transaction ID: D2051 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 3386 Hunter Ave | | Amount of Each Disbursement this Period <div>929.38</div> |
| City Newton State IA Zip Code 50208-8656 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2141.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | | |
|---|---|---|--|-------------------------------|
| A. Full Name (Last, First, Middle Initial) Clint A Birkenholtz | | Transaction ID: D2204 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | | |
| Mailing Address 3386 Hunter Ave | | Amount of Each Disbursement this Period <div>889.90</div> | | |
| City Newton | State IA | | | Zip Code 50208-8656 |
| Purpose of Disbursement Net salary | | | | <div>Category/Type</div> |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| B. Full Name (Last, First, Middle Initial) Internal Revenue Service | | Transaction ID: D2092 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 6 / 2 0 0 4</div> </div> | | |
| Mailing Address SERVICE Center | | Amount of Each Disbursement this Period <div>10071.52</div> | | |
| City Ogden | State UT | | | Zip Code 84201-0039 |
| Purpose of Disbursement 941 deposit | | | | <div>Category/Type</div> |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| C. Full Name (Last, First, Middle Initial) Internal Revenue Service | | Transaction ID: D1942 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 4</div> </div> | | |
| Mailing Address SERVICE Center | | Amount of Each Disbursement this Period <div>4168.59</div> | | |
| City Ogden | State UT | | | Zip Code 84201-0039 |
| Purpose of Disbursement 941 deposit | | | | <div>Category/Type</div> |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>15130.01</div> | | |
| TOTAL This Period (last page this line number only) | | | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement
941 deposit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2094

Date of Disbursement

M M / D D / Y Y Y Y
07 / 19 / 2004

Amount of Each Disbursement this Period

12236.08

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address SERVICE Center

City Ogden State UT Zip Code 84201-0039

Purpose of Disbursement
941 deposit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2199

Date of Disbursement

M M / D D / Y Y Y Y
07 / 28 / 2004

Amount of Each Disbursement this Period

10263.14

Full Name (Last, First, Middle Initial)

C. Jamie McQuillen-Benge

Mailing Address 2515 Tremont St

City Cedar Falls State IA Zip Code 50613-3950

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1999

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2004

Amount of Each Disbursement this Period

484.96

SUBTOTAL of Disbursements This Page (optional)

22984.18

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--|
| A. Full Name (Last, First, Middle Initial) Jamie McQuillen-Benge | | Transaction ID: D2152 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 2515 Tremont St | | | |
| City Cedar Falls | State IA | Zip Code 50613-3950 | |
| Purpose of Disbursement Net salary | | <div> <div>Category/Type</div> <div></div> </div> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |
| B. Full Name (Last, First, Middle Initial) Ramona J Muse | | Transaction ID: D2008 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 1704 Q Ave | | | |
| City Madrid | State IA | Zip Code 50156-7575 | |
| Purpose of Disbursement Net salary | | <div> <div>Category/Type</div> <div></div> </div> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |
| C. Full Name (Last, First, Middle Initial) Ramona J Muse | | Transaction ID: D2160 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 1704 Q Ave | | | |
| City Madrid | State IA | Zip Code 50156-7575 | |
| Purpose of Disbursement Net salary | | <div> <div>Category/Type</div> <div></div> </div> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

SUBTOTAL of Disbursements This Page (optional)

1315.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Brianna J Crowley | | Transaction ID: D1959 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 1104 Warwick Dr | | Amount of Each Disbursement this Period <div>521.78</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-1647 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Brianna J Crowley | | Transaction ID: D2110 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 1104 Warwick Dr | | Amount of Each Disbursement this Period <div>485.89</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-1647 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Edward A Furchtenicht | | Transaction ID: D1975 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 621 19th St | | Amount of Each Disbursement this Period <div>450.31</div> | |
| City Des Moines | State IA | | Zip Code 50309-3301 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1457.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Edward A Furchtenicht | | Transaction ID: D2126 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 621 19th St | | Amount of Each Disbursement this Period <div>500.96</div> | |
| City Des Moines | State IA | | Zip Code 50309-3301 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Matthew M Duffy | | Transaction ID: D1965 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 3014 Roxboro Drive | | Amount of Each Disbursement this Period <div>573.60</div> | |
| City Ames | State IA | | Zip Code 50010-4305 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Matthew M Duffy | | Transaction ID: D2116 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 3014 Roxboro Drive | | Amount of Each Disbursement this Period <div>605.43</div> | |
| City Ames | State IA | | Zip Code 50010-4305 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1679.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Steven S Sloan | | Transaction ID: D2086 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 205 14th St SE Apt 305 | | Amount of Each Disbursement this Period <div>883.50</div> |
| City Cedar Rapids State IA Zip Code 52403-4068 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Steven S Sloan | | Transaction ID: D2240 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 205 14th St SE Apt 305 | | Amount of Each Disbursement this Period <div>1132.63</div> |
| City Cedar Rapids State IA Zip Code 52403-4068 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Christopher M Bowen | | Transaction ID: D2053 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 2035 Sunnyside Ave | | Amount of Each Disbursement this Period <div>1084.29</div> |
| City Burlington State IA Zip Code 52601-2532 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>3100.42</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|--|--|
| A. Full Name (Last, First, Middle Initial) Christopher M Bowen | | Transaction ID: D2206 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 2035 Sunnyside Ave | | Amount of Each Disbursement this Period <div>910.19</div> |
| City Burlington State IA Zip Code 52601-2532 | | |
| Purpose of Disbursement Net salary | <input type="text"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Amanda R Mahnke | | Transaction ID: D17393 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 1800 Watrous Ave Apt 19C | | Amount of Each Disbursement this Period <div>1199.25</div> |
| City Des Moines State IA Zip Code 50315-3217 | | |
| Purpose of Disbursement Net Payroll | <input type="text"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Aaron M Wilds | | Transaction ID: D2043 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 411 S 38th Ave | | Amount of Each Disbursement this Period <div>464.71</div> |
| City Omaha State NE Zip Code 68131-3808 | | |
| Purpose of Disbursement Net salary | <input type="text"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2574.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--|
| A. Full Name (Last, First, Middle Initial) Aaron M Wilds | | Transaction ID: D2193 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 411 S 38th Ave | | Amount of Each Disbursement this Period <div>529.47</div> | |
| City Omaha State NE Zip Code 68131-3808 | Purpose of Disbursement Net salary Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Andrew N Monson | | Transaction ID: D2006 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 5621 S 170th St | | Amount of Each Disbursement this Period <div>396.66</div> | |
| City Omaha State NE Zip Code 68135-2257 | Purpose of Disbursement Net salary Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Andrew N Monson | | Transaction ID: D2159 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 5621 S 170th St | | Amount of Each Disbursement this Period <div>504.55</div> | |
| City Omaha State NE Zip Code 68135-2257 | Purpose of Disbursement Net salary Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1430.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Devon M Brown | | Transaction ID: D1952 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2104 Eastern Ave | | Amount of Each Disbursement this Period <div>373.10</div> |
| City Davenport State IA Zip Code 52803-2004 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Devon M Brown | | Transaction ID: D2103 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2104 Eastern Ave | | Amount of Each Disbursement this Period <div>349.52</div> |
| City Davenport State IA Zip Code 52803-2004 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Elizabeth Cervantes | | Transaction ID: D1954 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2321 Central Ave | | Amount of Each Disbursement this Period <div>384.72</div> |
| City Bettendorf State IA Zip Code 52722-5061 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1107.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Elizabeth Cervantes | | Transaction ID: D2105 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2321 Central Ave | | Amount of Each Disbursement this Period <div>455.68</div> |
| City Bettendorf State IA Zip Code 52722-5061 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Ben J Brady | | Transaction ID: D2054 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 2707 Hampton St | | Amount of Each Disbursement this Period <div>895.12</div> |
| City Ames State IA Zip Code 50010-7132 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Ben J Brady | | Transaction ID: D2207 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 2707 Hampton St | | Amount of Each Disbursement this Period <div>872.98</div> |
| City Ames State IA Zip Code 50010-7132 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2223.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|--|
| A. Full Name (Last, First, Middle Initial) Ashley R Kockler | | Transaction ID: D1989 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 705 14th Street PI | | Amount of Each Disbursement this Period <div>261.67</div> |
| City Nevada State IA Zip Code 50201-2405 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Ashley R Kockler | | Transaction ID: D2140 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 705 14th Street PI | | Amount of Each Disbursement this Period <div>520.18</div> |
| City Nevada State IA Zip Code 50201-2405 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Francoise E Galleto | | Transaction ID: D26286 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 4</div> </div> |
| Mailing Address 57 Lower Via Casitas | | Amount of Each Disbursement this Period <div>1056.03</div> |
| City Greenbrae State CA Zip Code 94904-2228 | | |
| Purpose of Disbursement Net payroll | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1837.88</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Katy L Pearson | | Transaction ID: D2015 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 525 Iowa Ave Apt 2 | | Amount of Each Disbursement this Period <div>620.28</div> |
| City Iowa City State IA Zip Code 52240-1834 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Matthew C Lees | | Transaction ID: D1993 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 5848 Hunt Rd | | Amount of Each Disbursement this Period <div>595.66</div> |
| City Burlington State IA Zip Code 52601-8908 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Matthew C Lees | | Transaction ID: D2144 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 5848 Hunt Rd | | Amount of Each Disbursement this Period <div>420.19</div> |
| City Burlington State IA Zip Code 52601-8908 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1636.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Ellen C Daly | | Transaction ID: D1960 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 3226 West St Apt 1 | | Amount of Each Disbursement this Period <div>246.72</div> |
| City Ames State IA Zip Code 50014-3565 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Edward J Goodman | | Transaction ID: D1979 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1306 Tomahawk Dr | | Amount of Each Disbursement this Period <div>441.47</div> |
| City Dubuque State IA Zip Code 52003-7878 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Edward J Goodman | | Transaction ID: D2130 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1306 Tomahawk Dr | | Amount of Each Disbursement this Period <div>531.48</div> |
| City Dubuque State IA Zip Code 52003-7878 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1219.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Richard E Harman | | Transaction ID: D1982 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 258 N Hyland Ave Apt 1 | | Amount of Each Disbursement this Period <div>521.53</div> |
| City Ames State IA Zip Code 50014-2863 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Richard E Harman | | Transaction ID: D2133 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 258 N Hyland Ave Apt 1 | | Amount of Each Disbursement this Period <div>572.14</div> |
| City Ames State IA Zip Code 50014-2863 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Leslie Ann Spring | | Transaction ID: D2028 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2819 N Main St | | Amount of Each Disbursement this Period <div>332.01</div> |
| City Davenport State IA Zip Code 52803-1127 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1425.68</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|--------------------|---|-------------------|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Leslie Ann Spring | | Transaction ID: D2179 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 2 | 7 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 7 | | 2 | 7 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | |
| Mailing Address 2819 N Main St | | Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">452.31</td> </tr> </table> | | 452.31 | | | | | | | | | | | | | | | | | | | |
| 452.31 | | | | | | | | | | | | | | | | | | | | | | | |
| City Davenport | State IA | Zip Code 52803-1127 | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: | | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Michael S Cooper | | Transaction ID: D1957 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 3 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 3 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | |
| Mailing Address 5811 Walnut Hill Ave | | Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">520.83</td> </tr> </table> | | 520.83 | | | | | | | | | | | | | | | | | | | |
| 520.83 | | | | | | | | | | | | | | | | | | | | | | | |
| City Des Moines | State IA | Zip Code 50312-1434 | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: | | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Michael S Cooper | | Transaction ID: D2108 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 2 | 7 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 7 | | 2 | 7 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | | |
| Mailing Address 5811 Walnut Hill Ave | | Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">481.85</td> </tr> </table> | | 481.85 | | | | | | | | | | | | | | | | | | | |
| 481.85 | | | | | | | | | | | | | | | | | | | | | | | |
| City Des Moines | State IA | Zip Code 50312-1434 | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: | | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

1454.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Sandra E Reich | | Transaction ID: D2017 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1519 29th St | | Amount of Each Disbursement this Period <div>427.57</div> |
| City Moline | State IL Zip Code 61265-3317 | |
| Purpose of Disbursement Net salary | | |
| Candidate Name | | |
| Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Sandra E Reich | | Transaction ID: D2168 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1519 29th St | | Amount of Each Disbursement this Period <div>517.16</div> |
| City Moline | State IL Zip Code 61265-3317 | |
| Purpose of Disbursement Net salary | | |
| Candidate Name | | |
| Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Amy M Gallmeyer | | Transaction ID: D1976 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2425 Crane Creek Rd | | Amount of Each Disbursement this Period <div>467.09</div> |
| City Waterloo | State IA Zip Code 50703-9257 | |
| Purpose of Disbursement Net salary | | |
| Candidate Name | | |
| Category/Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1411.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Amy M Gallmeyer | | Transaction ID: D2127 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2425 Crane Creek Rd | | Amount of Each Disbursement this Period <div>521.78</div> |
| City Waterloo State IA Zip Code 50703-9257 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Jason D Van Zee | | Transaction ID: D2035 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2555 Oxford Ln NW Apt 4 | | Amount of Each Disbursement this Period <div>380.05</div> |
| City Cedar Rapids State IA Zip Code 52405-1183 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Jason D Van Zee | | Transaction ID: D2186 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2555 Oxford Ln NW Apt 4 | | Amount of Each Disbursement this Period <div>496.35</div> |
| City Cedar Rapids State IA Zip Code 52405-1183 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1398.18</div> |
| TOTAL This Period (last page this line number only) | | <div></div> |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|---------------------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Andrew J Wenthe | | Transaction ID: D2090 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 5 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 5 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 4410 University Ave Apt 217 | | Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1041.50</td> </tr> </table> | 1041.50 | | | | | | | | | | | | | | | | | | | |
| 1041.50 | | | | | | | | | | | | | | | | | | | | | | |
| City Cedar Falls | State IA | | Zip Code 50613-6220 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | | Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Andrew J Wenthe | | Transaction ID: D2244 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 3 | 0 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 3 | 0 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 4410 University Ave Apt 217 | | Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1134.92</td> </tr> </table> | 1134.92 | | | | | | | | | | | | | | | | | | | |
| 1134.92 | | | | | | | | | | | | | | | | | | | | | | |
| City Cedar Falls | State IA | | Zip Code 50613-6220 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | | Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Nicholas J Liker | | Transaction ID: D1994 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 3 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 3 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 218 N Hyland Ave Apt 201 | | Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">464.66</td> </tr> </table> | 464.66 | | | | | | | | | | | | | | | | | | | |
| 464.66 | | | | | | | | | | | | | | | | | | | | | | |
| City Ames | State IA | | Zip Code 50014-7452 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | | Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | <table border="1"> <tr> <td colspan="10">2641.08</td> </tr> </table> | 2641.08 | | | | | | | | | | | | | | | | | | | |
| 2641.08 | | | | | | | | | | | | | | | | | | | | | | |
| TOTAL This Period (last page this line number only) | | <table border="1"> <tr> <td colspan="10"></td> </tr> </table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|---|--|---|
| A. Nicholas J Liker Full Name (Last, First, Middle Initial) Mailing Address 218 N Hyland Ave Apt 201 City Ames State IA Zip Code 50014-7452 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2145 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 4 Amount of Each Disbursement this Period 542.86 |
| B. Megan E Heneke Full Name (Last, First, Middle Initial) Mailing Address 712 E Market St City Iowa City State IA Zip Code 52245-2657 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2073 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 4 Amount of Each Disbursement this Period 973.50 |
| C. Megan E Heneke Full Name (Last, First, Middle Initial) Mailing Address 712 E Market St City Iowa City State IA Zip Code 52245-2657 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2227 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 973.50 |

SUBTOTAL of Disbursements This Page (optional)

2489.86

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|--|---|
| A. Ryan P Beatty Full Name (Last, First, Middle Initial) Mailing Address 801 Cross Park Ave Apt 3C City Iowa City State IA Zip Code 52240-4493 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D1949 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 449.24 |
| B. Gabriel J Whitaker Full Name (Last, First, Middle Initial) Mailing Address 204 Jewel Dr Apt 5 City Ames State IA Zip Code 50010-8576 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2040 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 363.81 |
| C. Gabriel J Whitaker Full Name (Last, First, Middle Initial) Mailing Address 204 Jewel Dr Apt 5 City Ames State IA Zip Code 50010-8576 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2190 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 4 Amount of Each Disbursement this Period 500.07 |

SUBTOTAL of Disbursements This Page (optional)

1313.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Lauren H Daumueller | | Transaction ID: D1961 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 3801 Cottage Grove Ave | | Amount of Each Disbursement this Period <div>387.87</div> |
| City Des Moines State IA Zip Code 50311-3605 | | |
| Purpose of Disbursement Net salary | <input type="text"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Lauren H Daumueller | | Transaction ID: D2111 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 3801 Cottage Grove Ave | | Amount of Each Disbursement this Period <div>480.22</div> |
| City Des Moines State IA Zip Code 50311-3605 | | |
| Purpose of Disbursement Net salary | <input type="text"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Corey J Goerd | | Transaction ID: D1978 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 4701 86th PI | | Amount of Each Disbursement this Period <div>480.22</div> |
| City Urbandale State IA Zip Code 50322 | | |
| Purpose of Disbursement Net salary | <input type="text"/> | |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1348.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|---|--|---|-------------------------------|
| A. Full Name (Last, First, Middle Initial) Corey J Goerdts | | Transaction ID: D2129 Date of Disbursement <div> <div>07</div> <div>27</div> <div>2004</div> </div> | |
| Mailing Address 4701 86th PI | | Amount of Each Disbursement this Period <div>584.44</div> | |
| City Urbandale | State IA | | Zip Code 50322 |
| Purpose of Disbursement Net salary | | | <div>Category/ Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Christopher D Bonfig | | Transaction ID: D2052 Date of Disbursement <div> <div>07</div> <div>15</div> <div>2004</div> </div> | |
| Mailing Address 320 E Burlington St Apt 8 | | Amount of Each Disbursement this Period <div>1069.10</div> | |
| City Iowa City | State IA | | Zip Code 52240-1670 |
| Purpose of Disbursement Net salary | | | <div>Category/ Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Christopher D Bonfig | | Transaction ID: D2205 Date of Disbursement <div> <div>07</div> <div>30</div> <div>2004</div> </div> | |
| Mailing Address 320 E Burlington St Apt 8 | | Amount of Each Disbursement this Period <div>1014.56</div> | |
| City Iowa City | State IA | | Zip Code 52240-1670 |
| Purpose of Disbursement Net salary | | | <div>Category/ Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>2668.10</div> | |
| TOTAL This Period (last page this line number only) | | <div></div> | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Krista K Cousins | | Transaction ID: D1958 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 6610 College Park Court, Apt. 4 | | Amount of Each Disbursement this Period <div>484.84</div> |
| City Cedar Rapids State IA Zip Code 52404-5284 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Krista K Cousins | | Transaction ID: D2109 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 6610 College Park Court, Apt. 4 | | Amount of Each Disbursement this Period <div>539.81</div> |
| City Cedar Rapids State IA Zip Code 52404-5284 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Joseph L Jones, II | | Transaction ID: D2076 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 900 65th St Apt 63 | | Amount of Each Disbursement this Period <div>1284.21</div> |
| City Windsor Heights State IA Zip Code 50312-1065 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2308.86

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Joseph L Jones, II | | Transaction ID: D2229 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 900 65th St Apt 63 | | Amount of Each Disbursement this Period <div>1325.13</div> |
| City Windsor Heights State IA Zip Code 50312-1065 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Thomas J Bierlein | | Transaction ID: D2100 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 108 Sandwood Crest Dr | | Amount of Each Disbursement this Period <div>252.05</div> |
| City Castle Rock State WA Zip Code 98611-9461 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Kathrine E Beno | | Transaction ID: D2246 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 580 S 35th St | | Amount of Each Disbursement this Period <div>405.37</div> |
| City West Des Moines State IA Zip Code 50265-2056 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1982.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Zachary J White | | Transaction ID: D2041 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 821 W 28th St | | Amount of Each Disbursement this Period <div>447.77</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-5018 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Zachary J White | | Transaction ID: D2191 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 821 W 28th St | | Amount of Each Disbursement this Period <div>480.34</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-5018 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Andrew M Batt | | Transaction ID: D1948 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 604 Roosevelt Ave | | Amount of Each Disbursement this Period <div>441.45</div> | |
| City Council Bluffs | State IA | | Zip Code 51503-1829 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1369.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Andrew M Batt

Mailing Address 604 Roosevelt Ave

City Council Bluffs State IA Zip Code 51503-1829

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2099

Date of Disbursement

M M / D D / Y Y Y Y
07 / 27 / 2004

Amount of Each Disbursement this Period

598.63

Full Name (Last, First, Middle Initial)

B. Jeffrey D Jacobs

Mailing Address 3415 119th Avenue Ct W

City Milan State IL Zip Code 61264-4500

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1988

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2004

Amount of Each Disbursement this Period

365.49

Full Name (Last, First, Middle Initial)

C. Jeffrey D Jacobs

Mailing Address 3415 119th Avenue Ct W

City Milan State IL Zip Code 61264-4500

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2139

Date of Disbursement

M M / D D / Y Y Y Y
07 / 27 / 2004

Amount of Each Disbursement this Period

473.10

SUBTOTAL of Disbursements This Page (optional)

1437.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Courtney M Rickert | | Transaction ID: D2083 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 1306 34th St Apt 27 | | Amount of Each Disbursement this Period <div>896.98</div> |
| City Des Moines State IA Zip Code 50311-2722 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Courtney M Rickert | | Transaction ID: D2237 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 1306 34th St Apt 27 | | Amount of Each Disbursement this Period <div>1059.38</div> |
| City Des Moines State IA Zip Code 50311-2722 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Justin K Ballard | | Transaction ID: D1947 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 5216 Ida St | | Amount of Each Disbursement this Period <div>418.75</div> |
| City Omaha State NE Zip Code 68152-2436 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2375.11

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Justin K Ballard | | Transaction ID: D2098 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 5216 Ida St | | Amount of Each Disbursement this Period <div>447.69</div> | |
| City Omaha | State NE | | Zip Code 68152-2436 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Samuel C McCormally | | Transaction ID: D1997 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 12828 Kettering Dr | | Amount of Each Disbursement this Period <div>398.13</div> | |
| City Herndon | State VA | | Zip Code 20171-2447 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Samuel C McCormally | | Transaction ID: D2149 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 12828 Kettering Dr | | Amount of Each Disbursement this Period <div>521.78</div> | |
| City Herndon | State VA | | Zip Code 20171-2447 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1367.60</div> | |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Matthew L Thompson | | Transaction ID: D2031 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2522 Pierce Ave | | Amount of Each Disbursement this Period <div>435.90</div> |
| City Ames State IA Zip Code 50010-4415 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Matthew L Thompson | | Transaction ID: D2182 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2522 Pierce Ave | | Amount of Each Disbursement this Period <div>673.34</div> |
| City Ames State IA Zip Code 50010-4415 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Rachel E Madden | | Transaction ID: D1996 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 831 E Jefferson St Apt 12 | | Amount of Each Disbursement this Period <div>551.00</div> |
| City Iowa City State IA Zip Code 52245-2439 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1660.24</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Rachel E Madden | | Transaction ID: D2148 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 831 E Jefferson St Apt 12 | | Amount of Each Disbursement this Period <div>478.40</div> |
| City Iowa City State IA Zip Code 52245-2439 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) John D McMillin | | Transaction ID: D1998 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 821 W 28th St | | Amount of Each Disbursement this Period <div>581.80</div> |
| City Cedar Falls State IA Zip Code 50613-5018 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) John D McMillin | | Transaction ID: D2151 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 821 W 28th St | | Amount of Each Disbursement this Period <div>353.43</div> |
| City Cedar Falls State IA Zip Code 50613-5018 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1413.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) John D McMillin | | Transaction ID: D2150 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 821 W 28th St | | Amount of Each Disbursement this Period <div>277.05</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-5018 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Kathleen M List | | Transaction ID: D2147 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 258 N Hyland Ave Apt 17 | | Amount of Each Disbursement this Period <div>456.01</div> | |
| City Ames | State IA | | Zip Code 50014-2865 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) DemStore.com | | Transaction ID: D1932 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 8 / 2 0 0 4</div> </div> | |
| Mailing Address 5104 Macarthur Blvd NW | | Amount of Each Disbursement this Period <div>520.00</div> | |
| City Washington | State DC | | Zip Code 20016-3316 |
| Purpose of Disbursement Grassroots Campaign Materials-Kerry Pres | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1253.06</div> | |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Angelica C Anderson | | Transaction ID: D1946 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 4106 Fillmore Ln | | Amount of Each Disbursement this Period <div>425.13</div> |
| City Davenport State IA Zip Code 52806-4524 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Angelica C Anderson | | Transaction ID: D2097 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 4106 Fillmore Ln | | Amount of Each Disbursement this Period <div>461.26</div> |
| City Davenport State IA Zip Code 52806-4524 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Maria M Misra | | Transaction ID: D2004 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 517 Iowa Ave Apt 4A | | Amount of Each Disbursement this Period <div>660.20</div> |
| City Iowa City State IA Zip Code 52240-1814 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1546.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Maria M Misra | | Transaction ID: D2157 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 517 Iowa Ave Apt 4A | | Amount of Each Disbursement this Period <div>481.28</div> |
| City Iowa City State IA Zip Code 52240-1814 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Golden Krishna | | Transaction ID: D1990 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 3901 Stonebridge Rd | | Amount of Each Disbursement this Period <div>358.34</div> |
| City West Des Moines State IA Zip Code 50265-3963 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Golden Krishna | | Transaction ID: D2141 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 3901 Stonebridge Rd | | Amount of Each Disbursement this Period <div>416.22</div> |
| City West Des Moines State IA Zip Code 50265-3963 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1255.84

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Adam B Zimmerman | | Transaction ID: D2197 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1434 Grand Ave | | Amount of Each Disbursement this Period <div>382.09</div> |
| City Iowa City State IA Zip Code 52246-1912 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Sarah Donahue | | Transaction ID: D2064 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 1800 Watrous Ave Apt 44D | | Amount of Each Disbursement this Period <div>1230.25</div> |
| City Des Moines State IA Zip Code 50315-3245 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Sarah Donahue | | Transaction ID: D2217 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 1800 Watrous Ave Apt 44D | | Amount of Each Disbursement this Period <div>1703.56</div> |
| City Des Moines State IA Zip Code 50315-3245 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

3315.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Tavis M Hall | | Transaction ID: D1981 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2085 Howard Avenue | | Amount of Each Disbursement this Period <div>506.84</div> |
| City Waterloo State IA Zip Code 50702-3134 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Tavis M Hall | | Transaction ID: D2132 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2085 Howard Avenue | | Amount of Each Disbursement this Period <div>470.49</div> |
| City Waterloo State IA Zip Code 50702-3134 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Nicholas R Leitheiser | | Transaction ID: D2078 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 4625 Steinbeck St Apt 11 | | Amount of Each Disbursement this Period <div>886.67</div> |
| City Ames State IA Zip Code 50014-8140 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1864.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|---|--|---|
| A. Nicholas R Leitheiser Full Name (Last, First, Middle Initial) Mailing Address 4625 Steinbeck St Apt 11 City Ames State IA Zip Code 50014-8140 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2231 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 922.23 |
| B. Nathan J Biggs Full Name (Last, First, Middle Initial) Mailing Address 1211 W 18th St City Cedar Falls State IA Zip Code 50613-3501 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D1950 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 480.33 |
| C. Nathan J Biggs Full Name (Last, First, Middle Initial) Mailing Address 1211 W 18th St City Cedar Falls State IA Zip Code 50613-3501 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2101 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 4 Amount of Each Disbursement this Period 492.98 |

SUBTOTAL of Disbursements This Page (optional)

1895.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Shayla Kasel | | Transaction ID: D1941 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 2403 35th St | | Amount of Each Disbursement this Period <div>5762.29</div> | |
| City Des Moines | State IA | | Zip Code 50310-4550 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Shayla Kasel | | Transaction ID: D1944 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 2403 35th St | | Amount of Each Disbursement this Period <div>1122.89</div> | |
| City Des Moines | State IA | | Zip Code 50310-4550 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Wooi J See | | Transaction ID: D2023 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 1019 Sioux Dr NW | | Amount of Each Disbursement this Period <div>687.84</div> | |
| City Cedar Rapids | State IA | | Zip Code 52405-2338 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

7573.02

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Wooi J See

Mailing Address 1019 Sioux Dr NW

City Cedar Rapids State IA Zip Code 52405-2338

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2174

Date of Disbursement

/ /

Amount of Each Disbursement this Period

713.12

Full Name (Last, First, Middle Initial)

B. Erin A Driesbach

Mailing Address 1820 S 41st St

City Lincoln State NE Zip Code 68506-1103

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1964

Date of Disbursement

/ /

Amount of Each Disbursement this Period

461.88

Full Name (Last, First, Middle Initial)

C. Erin A Driesbach

Mailing Address 1820 S 41st St

City Lincoln State NE Zip Code 68506-1103

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2115

Date of Disbursement

/ /

Amount of Each Disbursement this Period

412.60

SUBTOTAL of Disbursements This Page (optional)

1587.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|---|--------------------------|---|
| A. Full Name (Last, First, Middle Initial) Jordan E Oster | | Transaction ID: D2014 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1637 NW 122nd St | | Amount of Each Disbursement this Period <div>480.22</div> |
| City Clive State IA Zip Code 50325-8112 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Jordan E Oster | | Transaction ID: D2166 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1637 NW 122nd St | | Amount of Each Disbursement this Period <div>526.39</div> |
| City Clive State IA Zip Code 50325-8112 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Miranda R Davidson | | Transaction ID: D1963 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 616 Benson St | | Amount of Each Disbursement this Period <div>635.47</div> |
| City Council Bluffs State IA Zip Code 51501-1770 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1642.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Miranda R Davidson | | Transaction ID: D2113 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 616 Benson St | | Amount of Each Disbursement this Period <div>527.41</div> | |
| City Council Bluffs | State IA | | Zip Code 51501-1770 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Jake D Friedrichsen | | Transaction ID: D1974 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 818 W Seerley Blvd | | Amount of Each Disbursement this Period <div>484.95</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-3763 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Jake D Friedrichsen | | Transaction ID: D2125 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 818 W Seerley Blvd | | Amount of Each Disbursement this Period <div>543.14</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-3763 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1555.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|---|
| A. Full Name (Last, First, Middle Initial) Oliver Roeder | | Transaction ID: D2019 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 110 Lincoln Place Dr | | Amount of Each Disbursement this Period <div>478.74</div> | |
| City Des Moines State IA Zip Code 50312-4504 | | | |
| Purpose of Disbursement Net salary | <input type="text"/> | | |
| Candidate Name | Category/ Type | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Oliver Roeder | | Transaction ID: D2170 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 110 Lincoln Place Dr | | Amount of Each Disbursement this Period <div>548.07</div> | |
| City Des Moines State IA Zip Code 50312-4504 | | | |
| Purpose of Disbursement Net salary | | | <input type="text"/> |
| Candidate Name | | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Sarah J Dumdei | | Transaction ID: D1966 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 2116 Olive St Apt 3 | | Amount of Each Disbursement this Period <div>619.01</div> | |
| City Cedar Falls State IA Zip Code 50613-3777 | | | |
| Purpose of Disbursement Net salary | | | <input type="text"/> |
| Candidate Name | | | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

1645.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Sarah J Dumdei | | Transaction ID: D2117 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2116 Olive St Apt 3 | | Amount of Each Disbursement this Period <div>567.54</div> |
| City Cedar Falls State IA Zip Code 50613-3777 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Alison R Hoyer | | Transaction ID: D1987 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 504 W Monroe St | | Amount of Each Disbursement this Period <div>652.20</div> |
| City Mt Pleasant State IA Zip Code 52641-2119 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Alison R Hoyer | | Transaction ID: D2138 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 504 W Monroe St | | Amount of Each Disbursement this Period <div>468.47</div> |
| City Mt Pleasant State IA Zip Code 52641-2119 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1688.21

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|-------------------------------|---|
| A. Full Name (Last, First, Middle Initial) Jerodiah F Conley | | Transaction ID: D2059 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 2418 Amherst Street | | Amount of Each Disbursement this Period <div>1746.89</div> |
| City Des Moines State IA Zip Code 50313 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Jerodiah F Conley | | Transaction ID: D2212 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 2418 Amherst Street | | Amount of Each Disbursement this Period <div>1454.62</div> |
| City Des Moines State IA Zip Code 50313 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Joseph F Pieper | | Transaction ID: D2082 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 3335 325th St | | Amount of Each Disbursement this Period <div>901.50</div> |
| City Dexter State IA Zip Code 50070-7529 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

4103.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|---|--------------------------|---|
| A. Full Name (Last, First, Middle Initial) Joseph F Pieper | | Transaction ID: D2236 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 3335 325th St | | Amount of Each Disbursement this Period <div>1238.69</div> |
| City Dexter State IA Zip Code 50070-7529 | <div>Category/Type</div> | |
| Purpose of Disbursement Net salary | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Jesse G Harris | | Transaction ID: D2071 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 975 Applewood Ln | | Amount of Each Disbursement this Period <div>1220.86</div> |
| City Waukee State IA Zip Code 50263-8267 | <div>Category/Type</div> | |
| Purpose of Disbursement Net salary | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Jesse G Harris | | Transaction ID: D2225 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 975 Applewood Ln | | Amount of Each Disbursement this Period <div>1154.01</div> |
| City Waukee State IA Zip Code 50263-8267 | <div>Category/Type</div> | |
| Purpose of Disbursement Net salary | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

3613.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Steven M Chasse | | Transaction ID: D2058 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 2715 W. 66th Street South | | Amount of Each Disbursement this Period <div>1672.66</div> |
| City Newton State IA Zip Code 50208 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Steven M Chasse | | Transaction ID: D2211 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 2715 W. 66th Street South | | Amount of Each Disbursement this Period <div>1659.70</div> |
| City Newton State IA Zip Code 50208 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Jessica L Ellerbach | | Transaction ID: D1967 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 420 S Van Buren St #3 | | Amount of Each Disbursement this Period <div>291.36</div> |
| City Iowa City State IA Zip Code 52240 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

3623.72

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Jessica L Ellerbach | | Transaction ID: D2118 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 420 S Van Buren St #3 | | Amount of Each Disbursement this Period <div>544.89</div> |
| City Iowa City State IA Zip Code 52240 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Megan M Weddingfeld | | Transaction ID: D2037 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 5643 Kirkwood Blvd SW | | Amount of Each Disbursement this Period <div>427.07</div> |
| City Cedar Rapids State IA Zip Code 52404-8233 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Megan M Weddingfeld | | Transaction ID: D2188 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 5643 Kirkwood Blvd SW | | Amount of Each Disbursement this Period <div>454.94</div> |
| City Cedar Rapids State IA Zip Code 52404-8233 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional) ►

1426.90

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Kurt W Garretson | | Transaction ID: D1977 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1878 Salem Rd | | Amount of Each Disbursement this Period <div>619.30</div> |
| City Salem State IA Zip Code 52649-9452 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Kurt W Garretson | | Transaction ID: D2128 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1878 Salem Rd | | Amount of Each Disbursement this Period <div>443.28</div> |
| City Salem State IA Zip Code 52649-9452 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Jennifer A Rysdam | | Transaction ID: D2021 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address Buena Vista University Box 2676 | | Amount of Each Disbursement this Period <div>773.24</div> |
| City Storm Lake State IA Zip Code 50588 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1835.82

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|--|--|
| A. Full Name (Last, First, Middle Initial) Jennifer A Rysdam | | Transaction ID: D2172 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address Buena Vista University Box 2676 | | Amount of Each Disbursement this Period <div>588.09</div> |
| City Storm Lake State IA Zip Code 50588 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Anna Casteel | | Transaction ID: D2057 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 317 3rd St NE | | Amount of Each Disbursement this Period <div>950.87</div> |
| City Waverly State IA Zip Code 50677-1734 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Anna Casteel | | Transaction ID: D26285 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 9 / 2 0 0 4</div> </div> |
| Mailing Address 317 3rd St NE | | Amount of Each Disbursement this Period <div>783.50</div> |
| City Waverly State IA Zip Code 50677-1734 | | |
| Purpose of Disbursement Net Payroll | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2322.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|--|--|
| A. Anna Casteel Full Name (Last, First, Middle Initial) Mailing Address 317 3rd St NE City Waverly State IA Zip Code 50677-1734 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2210 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 1138.25 |
| B. Brad T Frevert Full Name (Last, First, Middle Initial) Mailing Address 2801 Woodland Ave City West Des Moines State IA Zip Code 50266-2031 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2066 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 4 Amount of Each Disbursement this Period 1319.10 |
| C. Brad T Frevert Full Name (Last, First, Middle Initial) Mailing Address 2801 Woodland Ave City West Des Moines State IA Zip Code 50266-2031 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2219 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 1253.49 |

SUBTOTAL of Disbursements This Page (optional)

3710.84

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Michael J Wiegand | | Transaction ID: D2042 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1242 42nd St | | Amount of Each Disbursement this Period <div>554.58</div> |
| City Des Moines State IA Zip Code 50311-2527 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Michael J Wiegand | | Transaction ID: D2192 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1242 42nd St | | Amount of Each Disbursement this Period <div>429.42</div> |
| City Des Moines State IA Zip Code 50311-2527 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Ethan A Newlin | | Transaction ID: D2011 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 200 Stanton Ave Apt 503 | | Amount of Each Disbursement this Period <div>395.49</div> |
| City Ames State IA Zip Code 50014-6806 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1379.49</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Ethan A Newlin | | Transaction ID: D2163 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 200 Stanton Ave Apt 503 | | Amount of Each Disbursement this Period <div>287.58</div> |
| City Ames State IA Zip Code 50014-6806 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Mark R Fetterhoff | | Transaction ID: D1970 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1310 30th St | | Amount of Each Disbursement this Period <div>179.32</div> |
| City Des Moines State IA Zip Code 50311-2904 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Mark R Fetterhoff | | Transaction ID: D2121 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1310 30th St | | Amount of Each Disbursement this Period <div>522.21</div> |
| City Des Moines State IA Zip Code 50311-2904 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

989.11

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Shannon K Griffiths | | Transaction ID: D1980 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2422 Hull Ave | | Amount of Each Disbursement this Period <div>235.49</div> |
| City Des Moines State IA Zip Code 50317-3630 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Shannon K Griffiths | | Transaction ID: D2131 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2422 Hull Ave | | Amount of Each Disbursement this Period <div>559.33</div> |
| City Des Moines State IA Zip Code 50317-3630 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Jennifer C Stokes | | Transaction ID: D2087 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 517 S Governor St | | Amount of Each Disbursement this Period <div>1128.98</div> |
| City Iowa City State IA Zip Code 52240-5624 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1923.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Jennifer C Stokes | | Transaction ID: D2241 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 517 S Governor St | | Amount of Each Disbursement this Period <div>1042.58</div> |
| City Iowa City State IA Zip Code 52240-5624 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Matthew D Deferranti | | Transaction ID: D2062 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 1406 46th St | | Amount of Each Disbursement this Period <div>1199.25</div> |
| City Des Moines State IA Zip Code 50311-2429 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Matthew D Deferranti | | Transaction ID: D2096 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 0 / 2 0 0 4</div> </div> |
| Mailing Address 1406 46th St | | Amount of Each Disbursement this Period <div>153.87</div> |
| City Des Moines State IA Zip Code 50311-2429 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2395.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Matthew D Deferranti | | Transaction ID: D2215 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 1406 46th St | | Amount of Each Disbursement this Period <div>1352.13</div> | |
| City Des Moines | State IA | | Zip Code 50311-2429 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Nicholaos G Antonopoulos | | Transaction ID: D2050 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 118 1/2 S Dubuque St Apt 8 | | Amount of Each Disbursement this Period <div>840.87</div> | |
| City Iowa City | State IA | | Zip Code 52240-4019 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Nicholaos G Antonopoulos | | Transaction ID: D2203 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 118 1/2 S Dubuque St Apt 8 | | Amount of Each Disbursement this Period <div>871.38</div> | |
| City Iowa City | State IA | | Zip Code 52240-4019 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>3064.38</div> | |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|---|--|---|--|
| A. Full Name (Last, First, Middle Initial) John P Noonan | | Transaction ID: D2012 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 1707 Navajo St | | Amount of Each Disbursement this Period <div>741.50</div> | |
| City Burlington State IA Zip Code 52601-3489 | Purpose of Disbursement Net salary | <input type="checkbox"/> Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) John P Noonan | | Transaction ID: D2164 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 1707 Navajo St | | Amount of Each Disbursement this Period <div>470.98</div> | |
| City Burlington State IA Zip Code 52601-3489 | Purpose of Disbursement Net salary | <input type="checkbox"/> Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Aaron S Zoellick | | Transaction ID: D2047 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 650 Orchard Ct | | Amount of Each Disbursement this Period <div>751.29</div> | |
| City Iowa City State IA Zip Code 52246-5534 | Purpose of Disbursement Net salary | <input type="checkbox"/> Category/ Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1963.77

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Aaron S Zoellick | | Transaction ID: D2198 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 650 Orchard Ct | | Amount of Each Disbursement this Period <div>517.16</div> |
| City Iowa City State IA Zip Code 52246-5534 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Rachel C Hardesty | | Transaction ID: D2224 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 630 N 6th St Apt 212 | | Amount of Each Disbursement this Period <div>902.39</div> |
| City Burlington State IA Zip Code 52601-5053 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Alexandra E Cooper | | Transaction ID: D1956 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 217 Coe College | | Amount of Each Disbursement this Period <div>436.00</div> |
| City Cedar Rapids State IA Zip Code 52402 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1855.55

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|---|--------------------------|---|
| A. Full Name (Last, First, Middle Initial) Alexandra E Cooper | | Transaction ID: D2107 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 217 Coe College | | Amount of Each Disbursement this Period <div>426.84</div> |
| City Cedar Rapids State IA Zip Code 52402 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) William T Pepper | | Transaction ID: D2016 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2483 Grande Ave SE | | Amount of Each Disbursement this Period <div>429.43</div> |
| City Cedar Rapids State IA Zip Code 52403-2817 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) William T Pepper | | Transaction ID: D2167 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2483 Grande Ave SE | | Amount of Each Disbursement this Period <div>598.40</div> |
| City Cedar Rapids State IA Zip Code 52403-2817 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1454.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Javarra M Hodge | | Transaction ID: D1985 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 3 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 3 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 227 Madison St | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>540.24</td> </tr> </table> | 540.24 | | | | | | | | | | | | | | | | | | | |
| 540.24 | | | | | | | | | | | | | | | | | | | | | | |
| City Waterloo | State IA | | Zip Code 50703-4239 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | | <input type="text"/> Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Javarra M Hodge | | Transaction ID: D2136 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 2 | 7 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 2 | 7 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 227 Madison St | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>567.96</td> </tr> </table> | 567.96 | | | | | | | | | | | | | | | | | | | |
| 567.96 | | | | | | | | | | | | | | | | | | | | | | |
| City Waterloo | State IA | | Zip Code 50703-4239 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | | <input type="text"/> Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Adriann E Gerardi | | Transaction ID: D2068 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 5 | | 2 | 0 | 0 | 4 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 7 | | 1 | 5 | | 2 | 0 | 0 | 4 | | | | | | | | | | | | | |
| Mailing Address 1440 Blairs Ferry Rd NE | | Amount of Each Disbursement this Period <table border="1"> <tr> <td>1012.07</td> </tr> </table> | 1012.07 | | | | | | | | | | | | | | | | | | | |
| 1012.07 | | | | | | | | | | | | | | | | | | | | | | |
| City Cedar Rapids | State IA | | Zip Code 52402-1228 | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Net salary | | | <input type="text"/> Category/ Type | | | | | | | | | | | | | | | | | | | |
| Candidate Name | | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

2120.27

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Adriann E Gerardi | | Transaction ID: D2221 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 1440 Blairs Ferry Rd NE | | Amount of Each Disbursement this Period <div>858.78</div> | |
| City Cedar Rapids | State IA | | Zip Code 52402-1228 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Ezekiel L Furlong | | Transaction ID: D2067 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 705 Maynard Ave | | Amount of Each Disbursement this Period <div>1050.91</div> | |
| City Waterloo | State IA | | Zip Code 50701-2121 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Ezekiel L Furlong | | Transaction ID: D2220 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 705 Maynard Ave | | Amount of Each Disbursement this Period <div>1110.66</div> | |
| City Waterloo | State IA | | Zip Code 50701-2121 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

3020.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 109 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Amy C Murray | | Transaction ID: D2081 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 250 Courtyard Dr Apt 110 | | Amount of Each Disbursement this Period <div>863.50</div> |
| City State Zip Code Dakota Dunes SD 57049-5179 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Amy C Murray | | Transaction ID: D2234 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 250 Courtyard Dr Apt 110 | | Amount of Each Disbursement this Period <div>863.50</div> |
| City State Zip Code Dakota Dunes SD 57049-5179 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Hannah J Schoenthal-Muse | | Transaction ID: D2085 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 2102 44th St | | Amount of Each Disbursement this Period <div>1023.50</div> |
| City State Zip Code Des Moines IA 50310-3011 | | |
| Purpose of Disbursement Net salary | <div>Category/ Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2750.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 110 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Hannah J Schoenthal-Muse | | Transaction ID: D2239 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 2102 44th St | | Amount of Each Disbursement this Period <div>1059.41</div> | |
| City Des Moines | State IA | | Zip Code 50310-3011 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Keith E Nelson | | Transaction ID: D2010 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 531 Benjamin Blvd | | Amount of Each Disbursement this Period <div>498.69</div> | |
| City Pleasant Hill | State IA | | Zip Code 50327-2119 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Keith E Nelson | | Transaction ID: D2162 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 531 Benjamin Blvd | | Amount of Each Disbursement this Period <div>495.07</div> | |
| City Pleasant Hill | State IA | | Zip Code 50327-2119 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

2053.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--|
| A. Full Name (Last, First, Middle Initial) Benjamin G Humphrey | | Transaction ID: D2074 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 705 Maynard Ave | | | |
| City Waterloo | State IA | Zip Code 50701-2121 | |
| Purpose of Disbursement Net salary | | <div> <div>Category/Type</div> <div></div> </div> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| | | Amount of Each Disbursement this Period <div>1031.42</div> | |
| B. Full Name (Last, First, Middle Initial) Benjamin G Humphrey | | Transaction ID: D2228 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 705 Maynard Ave | | | |
| City Waterloo | State IA | Zip Code 50701-2121 | |
| Purpose of Disbursement Net salary | | <div> <div>Category/Type</div> <div></div> </div> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| | | Amount of Each Disbursement this Period <div>938.81</div> | |
| C. Full Name (Last, First, Middle Initial) Jeffrey D Yanecek | | Transaction ID: D2091 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 785 Prospect Ct | | | |
| City North Liberty | State IA | Zip Code 52317-9128 | |
| Purpose of Disbursement Net salary | | <div> <div>Category/Type</div> <div></div> </div> | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| | | Amount of Each Disbursement this Period <div>796.50</div> | |

SUBTOTAL of Disbursements This Page (optional)

2766.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Jeffrey D Yanecek | | Transaction ID: D2245 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 785 Prospect Ct | | Amount of Each Disbursement this Period <div>1038.42</div> | |
| City North Liberty | State IA | | Zip Code 52317-9128 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Robert L Hamill | | Transaction ID: D2069 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 3407 Grand Ave Apt 122 | | Amount of Each Disbursement this Period <div>798.50</div> | |
| City Des Moines | State IA | | Zip Code 50312-4111 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Robert L Hamill | | Transaction ID: D2223 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 3407 Grand Ave Apt 122 | | Amount of Each Disbursement this Period <div>945.11</div> | |
| City Des Moines | State IA | | Zip Code 50312-4111 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

2782.03

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 113 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Mitchell D Lingo | | Transaction ID: D1995 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2535 Heather View Cir | | Amount of Each Disbursement this Period <div>448.90</div> |
| City Marion State IA Zip Code 52302-6414 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Mitchell D Lingo | | Transaction ID: D2146 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2535 Heather View Cir | | Amount of Each Disbursement this Period <div>501.75</div> |
| City Marion State IA Zip Code 52302-6414 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Christian Urrutia | | Transaction ID: D2033 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 630 N Dubuque St | | Amount of Each Disbursement this Period <div>614.13</div> |
| City Iowa City State IA Zip Code 52245-1915 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1564.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Christian Urrutia | | Transaction ID: D2184 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 630 N Dubuque St | | Amount of Each Disbursement this Period <div>558.72</div> |
| City Iowa City State IA Zip Code 52245-1915 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Crystal Roldan | | Transaction ID: D2020 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 766 Charlotte Ave | | Amount of Each Disbursement this Period <div>230.87</div> |
| City Davenport State IA Zip Code 52803-5725 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Crystal Roldan | | Transaction ID: D2171 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 766 Charlotte Ave | | Amount of Each Disbursement this Period <div>306.60</div> |
| City Davenport State IA Zip Code 52803-5725 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1096.19</div> |
| TOTAL This Period (last page this line number only) | | <div></div> |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 115 / 174

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Warren County Assessor

Mailing Address 301 N Buxton St
Ste 108

City Indianola State IA Zip Code 50125-1801

Purpose of Disbursement
Voter list

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1898

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2004

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

B. Ann C Erickson

Mailing Address 2602 18 St B

City Moline State IL Zip Code 61265

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D1968

Date of Disbursement

M M / D D / Y Y Y Y
07 / 13 / 2004

Amount of Each Disbursement this Period

430.34

Full Name (Last, First, Middle Initial)

C. Ann C Erickson

Mailing Address 2602 18 St B

City Moline State IL Zip Code 61265

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2119

Date of Disbursement

M M / D D / Y Y Y Y
07 / 27 / 2004

Amount of Each Disbursement this Period

560.57

SUBTOTAL of Disbursements This Page (optional)

1015.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 116 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|---|
| A. Full Name (Last, First, Middle Initial) Joshua R Sims | | Transaction ID: D2026 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 104 Crestview Dr | | Amount of Each Disbursement this Period <div>198.55</div> | |
| City West Branch State IA Zip Code 52358-9648 | | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Joshua R Sims | | Transaction ID: D2177 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 104 Crestview Dr | | Amount of Each Disbursement this Period <div>588.85</div> | |
| City West Branch State IA Zip Code 52358-9648 | | | |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) Brian A Hayden | | Transaction ID: D2072 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 1026 Central Ave | | Amount of Each Disbursement this Period <div>762.21</div> | |
| City Fort Dodge State IA Zip Code 50501-4002 | | | |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

1549.61

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|---|--|--|--|
| A. Full Name (Last, First, Middle Initial) Brian A Hayden | | Transaction ID: D2226 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 4 | |
| Mailing Address 1026 Central Ave | | | |
| City Fort Dodge | State IA | Zip Code 50501-4002 | Amount of Each Disbursement this Period 883.50 |
| Purpose of Disbursement Net salary | | <input type="checkbox"/> Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |
| B. Full Name (Last, First, Middle Initial) Roger J Crimmins | | Transaction ID: D2060 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 4 | |
| Mailing Address 418 1st St SE | | | |
| City Mason City | State IA | Zip Code 50401-3931 | Amount of Each Disbursement this Period 988.50 |
| Purpose of Disbursement Net salary | | <input type="checkbox"/> Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |
| C. Full Name (Last, First, Middle Initial) Roger J Crimmins | | Transaction ID: D2213 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 4 | |
| Mailing Address 418 1st St SE | | | |
| City Mason City | State IA | Zip Code 50401-3931 | Amount of Each Disbursement this Period 1104.36 |
| Purpose of Disbursement Net salary | | <input type="checkbox"/> Category/ Type | |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

SUBTOTAL of Disbursements This Page (optional)

2976.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Jessie R Weishaar | | Transaction ID: D2089 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 1516 Otley Ave | | Amount of Each Disbursement this Period <div>931.87</div> |
| City Perry State IA Zip Code 50220-1751 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Jessie R Weishaar | | Transaction ID: D2243 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 1516 Otley Ave | | Amount of Each Disbursement this Period <div>1036.98</div> |
| City Perry State IA Zip Code 50220-1751 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Kyle L Meck | | Transaction ID: D2000 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 15206 145th Ave | | Amount of Each Disbursement this Period <div>489.45</div> |
| City Burlington State IA Zip Code 52601-8749 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2458.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Kyle L Meck | | Transaction ID: D2153 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 15206 145th Ave | | Amount of Each Disbursement this Period <div>318.61</div> |
| City Burlington State IA Zip Code 52601-8749 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Emily M Van Norman | | Transaction ID: D2034 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2515 Tremont St | | Amount of Each Disbursement this Period <div>589.14</div> |
| City Cedar Falls State IA Zip Code 50613-3950 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Emily M Van Norman | | Transaction ID: D2185 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2515 Tremont St | | Amount of Each Disbursement this Period <div>433.31</div> |
| City Cedar Falls State IA Zip Code 50613-3950 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1341.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Amanda A Hollis | | Transaction ID: D1986 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 510 Billy Sunday Rd | | Amount of Each Disbursement this Period <div>507.01</div> |
| City Ames State IA Zip Code 50010-8110 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Amanda A Hollis | | Transaction ID: D2137 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 510 Billy Sunday Rd | | Amount of Each Disbursement this Period <div>465.57</div> |
| City Ames State IA Zip Code 50010-8110 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Alan F Schultz | | Transaction ID: D2022 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1635 26th St NW | | Amount of Each Disbursement this Period <div>459.47</div> |
| City Cedar Rapids State IA Zip Code 52405-1420 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1432.05</div> |
| TOTAL This Period (last page this line number only) | | <div></div> |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Alan F Schultz | | Transaction ID: D2173 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 1635 26th St NW | | Amount of Each Disbursement this Period <div>809.40</div> | |
| City Cedar Rapids | State IA | | Zip Code 52405-1420 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Julie Andreeff Jensen | | Transaction ID: D2049 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 2139 N Scott St | | Amount of Each Disbursement this Period <div>1440.12</div> | |
| City Arlington | State VA | | Zip Code 22209-1010 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Julie Andreeff Jensen | | Transaction ID: D2202 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 2139 N Scott St | | Amount of Each Disbursement this Period <div>1440.13</div> | |
| City Arlington | State VA | | Zip Code 22209-1010 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

3689.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|--|--|
| A. Marcia L Nichols Full Name (Last, First, Middle Initial) Mailing Address 5917 Greendale Pl Apt 203 City Johnston State IA Zip Code 50131-2020 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2235 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 2196.87 |
| B. Andrew J Miller Full Name (Last, First, Middle Initial) Mailing Address 3015 Oakland Street City Ames State IA Zip Code 50010-6392 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2003 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 470.99 |
| C. Andrew J Miller Full Name (Last, First, Middle Initial) Mailing Address 3015 Oakland Street City Ames State IA Zip Code 50010-6392 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2156 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 4 Amount of Each Disbursement this Period 360.16 |
| SUBTOTAL of Disbursements This Page (optional) ▶ | | 3028.02 |
| TOTAL This Period (last page this line number only) ▶ | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Christian K Evans | | Transaction ID: D1969 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 2105 Exchange St | | Amount of Each Disbursement this Period <div>682.02</div> |
| City Keokuk State IA Zip Code 52632-2720 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Christian K Evans | | Transaction ID: D2120 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2105 Exchange St | | Amount of Each Disbursement this Period <div>463.10</div> |
| City Keokuk State IA Zip Code 52632-2720 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Discover Network | | Transaction ID: D1868 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 2 / 2 0 0 4</div> </div> |
| Mailing Address PO Box 52145 | | Amount of Each Disbursement this Period <div>1.56</div> |
| City Phoenix State AZ Zip Code 85072-2145 | | |
| Purpose of Disbursement Credit card fee | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1146.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Abigail A Longstreet

Mailing Address 572 S Cedar Ave

City Elmhurst State IL Zip Code 60126-4136

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2080

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1021.38

Full Name (Last, First, Middle Initial)

B. Abigail A Longstreet

Mailing Address 572 S Cedar Ave

City Elmhurst State IL Zip Code 60126-4136

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2233

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2004.17

Full Name (Last, First, Middle Initial)

C. Secretary of State

Mailing Address Hoover Building

City Des Moines State IA Zip Code 50319-0106

Purpose of Disbursement
Voter file update

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1875

Date of Disbursement

/ /

Amount of Each Disbursement this Period

180.10

SUBTOTAL of Disbursements This Page (optional)

3205.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|---|--|---|
| A. Secretary of State Full Name (Last, First, Middle Initial) Mailing Address Hoover Building City Des Moines State IA Zip Code 50319-0106 Purpose of Disbursement Voter file update Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D1915 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 1 / 2 0 0 4 Amount of Each Disbursement this Period 125.78 |
| B. Brian T Christiansen Full Name (Last, First, Middle Initial) Mailing Address 4725 Happy Hollow Ln City Lincoln State NE Zip Code 68516-5125 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D1955 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 434.84 |
| C. Brian T Christiansen Full Name (Last, First, Middle Initial) Mailing Address 4725 Happy Hollow Ln City Lincoln State NE Zip Code 68516-5125 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2106 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 4 Amount of Each Disbursement this Period 504.55 |

SUBTOTAL of Disbursements This Page (optional)

1065.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Alexander V Fisher | | Transaction ID: D1971 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 164 Hummingbird Ln | | Amount of Each Disbursement this Period <div>429.43</div> |
| City Iowa City State IA Zip Code 52245-9257 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Alexander V Fisher | | Transaction ID: D2122 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 164 Hummingbird Ln | | Amount of Each Disbursement this Period <div>256.69</div> |
| City Iowa City State IA Zip Code 52245-9257 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Jack N Herbert | | Transaction ID: D1983 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 327 E College St Apt 1718 | | Amount of Each Disbursement this Period <div>441.45</div> |
| City Iowa City State IA Zip Code 52240-1685 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1127.57</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Jack N Herbert | | Transaction ID: D2134 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 327 E College St Apt 1718 | | Amount of Each Disbursement this Period <div>585.06</div> |
| City Iowa City State IA Zip Code 52240-1685 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Thomas F Stewart | | Transaction ID: D2029 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 300 W Penn St | | Amount of Each Disbursement this Period <div>441.47</div> |
| City Williamsburg State IA Zip Code 52361-9460 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Thomas F Stewart | | Transaction ID: D2180 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 300 W Penn St | | Amount of Each Disbursement this Period <div>575.21</div> |
| City Williamsburg State IA Zip Code 52361-9460 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>1601.74</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|---|--|--|
| A. VAN LCC Full Name (Last, First, Middle Initial) Mailing Address 54 Regent St City Cambridge State MA Zip Code 02140-2112 Purpose of Disbursement Voter Activist Network maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D1894 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 6500.00 |
| B. Renner K Walker Full Name (Last, First, Middle Initial) Mailing Address 1922 80th St City Windsor Heights State IA Zip Code 50322-5604 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2036 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 471.90 |
| C. Renner K Walker Full Name (Last, First, Middle Initial) Mailing Address 1922 80th St City Windsor Heights State IA Zip Code 50322-5604 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2187 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 4 Amount of Each Disbursement this Period 523.83 |

SUBTOTAL of Disbursements This Page (optional)

7495.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|---|--------------------------|---|
| A. Full Name (Last, First, Middle Initial) James M Thompson | | Transaction ID: D2088 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 3619 Gunston Rd | | Amount of Each Disbursement this Period <div>883.50</div> |
| City Alexandria State VA Zip Code 22302-2007 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) James M Thompson | | Transaction ID: D2242 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 3619 Gunston Rd | | Amount of Each Disbursement this Period <div>908.50</div> |
| City Alexandria State VA Zip Code 22302-2007 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Josiah R Friction | | Transaction ID: D1973 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 505 E Burlington St | | Amount of Each Disbursement this Period <div>461.46</div> |
| City Iowa City State IA Zip Code 52240-1969 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

2253.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Josiah R Friction | | Transaction ID: D2124 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 505 E Burlington St | | Amount of Each Disbursement this Period <div>329.34</div> |
| City Iowa City State IA Zip Code 52240-1969 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Lucas P Forte | | Transaction ID: D1972 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1124 Oakcrest St Apt 12 | | Amount of Each Disbursement this Period <div>458.61</div> |
| City Iowa City State IA Zip Code 52246-5165 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Lucas P Forte | | Transaction ID: D2123 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1124 Oakcrest St Apt 12 | | Amount of Each Disbursement this Period <div>511.65</div> |
| City Iowa City State IA Zip Code 52246-5165 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1299.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Shawn M Rolland | | Transaction ID: D2084 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 1243 34th St | | Amount of Each Disbursement this Period <div>955.53</div> |
| City Des Moines State IA Zip Code 50311-2701 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Shawn M Rolland | | Transaction ID: D2238 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 1243 34th St | | Amount of Each Disbursement this Period <div>892.62</div> |
| City Des Moines State IA Zip Code 50311-2701 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Nicolas J Ferre | | Transaction ID: D2065 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 824 Whitman Ct | | Amount of Each Disbursement this Period <div>901.50</div> |
| City Libertyville State IL Zip Code 60048-1667 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>2749.65</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|--|--|
| A. Nicolas J Ferre Full Name (Last, First, Middle Initial) Mailing Address 824 Whitman Ct City Libertyville State IL Zip Code 60048-1667 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2218 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 4 Amount of Each Disbursement this Period 1226.34 |
| B. Elisa K Kruse Full Name (Last, First, Middle Initial) Mailing Address 319 Stutsman St City Council Bluffs State IA Zip Code 51503-4534 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D1991 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 4 Amount of Each Disbursement this Period 454.13 |
| C. Elisa K Kruse Full Name (Last, First, Middle Initial) Mailing Address 319 Stutsman St City Council Bluffs State IA Zip Code 51503-4534 Purpose of Disbursement Net salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D2142 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 4 Amount of Each Disbursement this Period 383.66 |

SUBTOTAL of Disbursements This Page (optional)

2064.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Jayme A Sime | | Transaction ID: D2025 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 1621 S Main St | | Amount of Each Disbursement this Period <div>802.79</div> | |
| City Burlington | State IA | | Zip Code 52601-6124 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Jayme A Sime | | Transaction ID: D2176 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 1621 S Main St | | Amount of Each Disbursement this Period <div>556.47</div> | |
| City Burlington | State IA | | Zip Code 52601-6124 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Amy N Levy | | Transaction ID: D2079 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 9848 Brookview Dr | | Amount of Each Disbursement this Period <div>928.55</div> | |
| City Urbandale | State IA | | Zip Code 50322-6248 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

2287.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Amy N Levy | | Transaction ID: D2232 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 9848 Brookview Dr | | Amount of Each Disbursement this Period <div>1132.13</div> | |
| City Urbandale | State IA | | Zip Code 50322-6248 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Jacob W Trumm | | Transaction ID: D2032 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 106 N Governor St | | Amount of Each Disbursement this Period <div>537.13</div> | |
| City Iowa City | State IA | | Zip Code 52245-2614 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Jacob W Trumm | | Transaction ID: D2183 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 106 N Governor St | | Amount of Each Disbursement this Period <div>493.72</div> | |
| City Iowa City | State IA | | Zip Code 52245-2614 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

2162.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Wellmark

Mailing Address PO Box 10353

City Des Moines State IA Zip Code 50306-0353

Purpose of Disbursement
Health insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2039

Date of Disbursement

/ /

Amount of Each Disbursement this Period

410.80

Full Name (Last, First, Middle Initial)

B. Wellmark

Mailing Address PO Box 10353

City Des Moines State IA Zip Code 50306-0353

Purpose of Disbursement
Health insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2038

Date of Disbursement

/ /

Amount of Each Disbursement this Period

410.80

Full Name (Last, First, Middle Initial)

C. Wellmark

Mailing Address PO Box 10353

City Des Moines State IA Zip Code 50306-0353

Purpose of Disbursement
Health insurance

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2189

Date of Disbursement

/ /

Amount of Each Disbursement this Period

529.84

SUBTOTAL of Disbursements This Page (optional)

1351.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Matthew W Opad

Mailing Address 922 E Washington St
Apt 4

City Iowa City State IA Zip Code 52240-5202

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2013

Date of Disbursement

/ /

Amount of Each Disbursement this Period

704.90

Full Name (Last, First, Middle Initial)

B. Matthew W Opad

Mailing Address 922 E Washington St
Apt 4

City Iowa City State IA Zip Code 52240-5202

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2165

Date of Disbursement

/ /

Amount of Each Disbursement this Period

568.38

Full Name (Last, First, Middle Initial)

C. Amanda L Miller

Mailing Address 1133 Grand Blvd

City Cedar Falls State IA Zip Code 50613-4305

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D2002

Date of Disbursement

/ /

Amount of Each Disbursement this Period

514.30

SUBTOTAL of Disbursements This Page (optional)

1787.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--|
| A. Full Name (Last, First, Middle Initial) Amanda L Miller | | Transaction ID: D2155 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 1133 Grand Blvd | | Amount of Each Disbursement this Period <div>526.98</div> | |
| City Cedar Falls State IA Zip Code 50613-4305 | Purpose of Disbursement Net salary Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Kathryn M Williams | | Transaction ID: D2044 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 7 Wenwood Ct | | Amount of Each Disbursement this Period <div>453.93</div> | |
| City Council Bluffs State IA Zip Code 51503-5127 | Purpose of Disbursement Net salary Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Kathryn M Williams | | Transaction ID: D2194 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 7 Wenwood Ct | | Amount of Each Disbursement this Period <div>376.96</div> | |
| City Council Bluffs State IA Zip Code 51503-5127 | Purpose of Disbursement Net salary Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1357.87

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|--|--------------------------|
| A. Full Name (Last, First, Middle Initial) Clint D Albertsen | | Transaction ID: D2048 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 1607 Little John Cir Apt 6 | | Amount of Each Disbursement this Period <div>1089.86</div> | |
| City Council Bluffs | State IA | | Zip Code 51503-0533 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |
| B. Full Name (Last, First, Middle Initial) Clint D Albertsen | | Transaction ID: D2201 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 1607 Little John Cir Apt 6 | | Amount of Each Disbursement this Period <div>976.95</div> | |
| City Council Bluffs | State IA | | Zip Code 51503-0533 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |
| C. Full Name (Last, First, Middle Initial) Shannon R Smith | | Transaction ID: D2027 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 3865 Woodland Ave Apt 5 | | Amount of Each Disbursement this Period <div>380.05</div> | |
| City West Des Moines | State IA | | Zip Code 50266-1986 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

SUBTOTAL of Disbursements This Page (optional) ►

2446.86

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Shannon R Smith | | Transaction ID: D2178 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 3865 Woodland Ave Apt 5 | | Amount of Each Disbursement this Period <div>519.22</div> |
| City West Des Moines State IA Zip Code 50266-1986 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Jon M Woodruff | | Transaction ID: D2046 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1243 34th St | | Amount of Each Disbursement this Period <div>438.66</div> |
| City Des Moines State IA Zip Code 50311-2701 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Jon M Woodruff | | Transaction ID: D2196 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1243 34th St | | Amount of Each Disbursement this Period <div>591.03</div> |
| City Des Moines State IA Zip Code 50311-2701 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1548.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Janelle M Domeyer | | Transaction ID: D2063 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 1916 Parkwild Dr Apt 50 | | Amount of Each Disbursement this Period <div>901.50</div> | |
| City Council Bluffs | State IA | | Zip Code 51503-1875 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Janelle M Domeyer | | Transaction ID: D2216 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 1916 Parkwild Dr Apt 50 | | Amount of Each Disbursement this Period <div>1080.93</div> | |
| City Council Bluffs | State IA | | Zip Code 51503-1875 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Brendon D Moe | | Transaction ID: D2005 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 3202 University Dr Apt K2 | | Amount of Each Disbursement this Period <div>627.74</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-4871 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

2610.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Brendon D Moe

Mailing Address 3202 University Dr
Apt K2

City Cedar Falls State IA Zip Code 50613-4871

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2158

Date of Disbursement

/ /

Amount of Each Disbursement this Period

443.28

Full Name (Last, First, Middle Initial)

B. Chase O Davidson

Mailing Address 616 Benson St

City Council Bluffs State IA Zip Code 51501-1770

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D1962

Date of Disbursement

/ /

Amount of Each Disbursement this Period

419.75

Full Name (Last, First, Middle Initial)

C. Chase O Davidson

Mailing Address 616 Benson St

City Council Bluffs State IA Zip Code 51501-1770

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2112

Date of Disbursement

/ /

Amount of Each Disbursement this Period

460.20

SUBTOTAL of Disbursements This Page (optional)

1323.23

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial)

A. Craig A Davis

Mailing Address 1800 Watrous Ave
Apt 50B

City Des Moines State IA Zip Code 50315-3251

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2061

Date of Disbursement

/ /

Amount of Each Disbursement this Period

863.50

Full Name (Last, First, Middle Initial)

B. Craig A Davis

Mailing Address 1800 Watrous Ave
Apt 50B

City Des Moines State IA Zip Code 50315-3251

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2214

Date of Disbursement

/ /

Amount of Each Disbursement this Period

863.50

Full Name (Last, First, Middle Initial)

C. Maria G Navarro

Mailing Address 5673 18th St

City Bettendorf State IA Zip Code 52722-7531

Purpose of Disbursement
Net salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D2009

Date of Disbursement

/ /

Amount of Each Disbursement this Period

465.92

SUBTOTAL of Disbursements This Page (optional)

2192.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Maria G Navarro | | Transaction ID: D2161 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 5673 18th St | | Amount of Each Disbursement this Period <div>586.28</div> | |
| City Bettendorf | State IA | | Zip Code 52722-7531 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Alison N Kurth | | Transaction ID: D2077 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> | |
| Mailing Address 1933 N Marquette Street | | Amount of Each Disbursement this Period <div>924.00</div> | |
| City Davenport | State IA | | Zip Code 52804-2159 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Alison N Kurth | | Transaction ID: D2230 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 1933 N Marquette Street | | Amount of Each Disbursement this Period <div>986.64</div> | |
| City Davenport | State IA | | Zip Code 52804-2159 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

2496.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 144 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|--|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Christopher A Sime | | Transaction ID: D2024 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 803 Franklin St | | Amount of Each Disbursement this Period <div>492.10</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-2966 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Christopher A Sime | | Transaction ID: D2175 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 803 Franklin St | | Amount of Each Disbursement this Period <div>526.09</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-2966 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Philip F Rippke | | Transaction ID: D2018 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 2109 College St Apt 49 | | Amount of Each Disbursement this Period <div>632.33</div> | |
| City Cedar Falls | State IA | | Zip Code 50613-3681 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional) ►

1650.52

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Philip F Rippke | | Transaction ID: D2169 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 2109 College St Apt 49 | | Amount of Each Disbursement this Period <div>549.48</div> |
| City Cedar Falls State IA Zip Code 50613-3681 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Elizabeth E Hilkin | | Transaction ID: D1984 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1922 Gnahn St | | Amount of Each Disbursement this Period <div>692.63</div> |
| City Burlington State IA Zip Code 52601-4406 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Elizabeth E Hilkin | | Transaction ID: D2135 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1922 Gnahn St | | Amount of Each Disbursement this Period <div>230.87</div> |
| City Burlington State IA Zip Code 52601-4406 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

1472.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 146 / 174

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Justin R Buell | | Transaction ID: D2209 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> |
| Mailing Address 3249 Jackson St | | Amount of Each Disbursement this Period <div>1357.69</div> |
| City San Francisco State CA Zip Code 94118-2016 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Erica L Carnes | | Transaction ID: D1953 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 153A Lark Ave | | Amount of Each Disbursement this Period <div>454.17</div> |
| City Ames State IA Zip Code 50010-8032 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Erica L Carnes | | Transaction ID: D2104 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 153A Lark Ave | | Amount of Each Disbursement this Period <div>508.68</div> |
| City Ames State IA Zip Code 50010-8032 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | <div>Category/Type</div> | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

2320.54

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Michael J Wolfe | | Transaction ID: D2045 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 1070 50th St Unit 1D | | Amount of Each Disbursement this Period <div>461.75</div> |
| City West Des Moines State IA Zip Code 50266-4900 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Michael J Wolfe | | Transaction ID: D2195 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 1070 50th St Unit 1D | | Amount of Each Disbursement this Period <div>480.22</div> |
| City West Des Moines State IA Zip Code 50266-4900 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. Full Name (Last, First, Middle Initial) Seth A Brooks | | Transaction ID: D2055 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 4</div> </div> |
| Mailing Address 3828 Cass St Apt 5 | | Amount of Each Disbursement this Period <div>1165.10</div> |
| City Omaha State NE Zip Code 68131-1851 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| SUBTOTAL of Disbursements This Page (optional) | | <div>2107.07</div> |
| TOTAL This Period (last page this line number only) | | |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Seth A Brooks | | Transaction ID: D2208 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 4</div> </div> | |
| Mailing Address 3828 Cass St Apt 5 | | Amount of Each Disbursement this Period <div>999.05</div> | |
| City Omaha | State NE | | Zip Code 68131-1851 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |
| B. Full Name (Last, First, Middle Initial) Corey L Davis | | Transaction ID: D2114 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 1220 1st Ave NE | | Amount of Each Disbursement this Period <div>335.63</div> | |
| City Cedar Rapids | State IA | | Zip Code 52402-5008 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |
| C. Full Name (Last, First, Middle Initial) Eric J Langston | | Transaction ID: D1992 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 4257 Sunland Ct SE | | Amount of Each Disbursement this Period <div>421.76</div> | |
| City Cedar Rapids | State IA | | Zip Code 52403-2119 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

SUBTOTAL of Disbursements This Page (optional)

1756.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | | |
|--|---|---|--------------------------|
| A. Full Name (Last, First, Middle Initial) Eric J Langston | | Transaction ID: D2143 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 4257 Sunland Ct SE | | Amount of Each Disbursement this Period <div>599.01</div> | |
| City Cedar Rapids | State IA | | Zip Code 52403-2119 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| B. Full Name (Last, First, Middle Initial) Andrew P Mertens | | Transaction ID: D2001 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> | |
| Mailing Address 316 Ridgeland Avenue, Apt. 1 | | Amount of Each Disbursement this Period <div>733.06</div> | |
| City Iowa City | State IA | | Zip Code 52246 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| C. Full Name (Last, First, Middle Initial) Andrew P Mertens | | Transaction ID: D2154 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> | |
| Mailing Address 316 Ridgeland Avenue, Apt. 1 | | Amount of Each Disbursement this Period <div>527.39</div> | |
| City Iowa City | State IA | | Zip Code 52246 |
| Purpose of Disbursement Net salary | | | <div>Category/Type</div> |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

SUBTOTAL of Disbursements This Page (optional)

1859.46

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|---|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input checked="" type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

| | | |
|--|---|---|
| A. Full Name (Last, First, Middle Initial) Alissa B Brammer | | Transaction ID: D1951 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 4</div> </div> |
| Mailing Address 4303 Harwood Dr | | Amount of Each Disbursement this Period <div>406.34</div> |
| City Des Moines State IA Zip Code 50312-2319 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. Full Name (Last, First, Middle Initial) Alissa B Brammer | | Transaction ID: D2102 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 7 / 2 0 0 4</div> </div> |
| Mailing Address 4303 Harwood Dr | | Amount of Each Disbursement this Period <div>480.43</div> |
| City Des Moines State IA Zip Code 50312-2319 | | |
| Purpose of Disbursement Net salary | <div>Category/Type</div> | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional) ►

886.77

TOTAL This Period (last page this line number only) ►

245665.79

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 151 / 174

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Iowa Democratic Party - State Account

Nature of Debt (Purpose):
Non-Federal Contribution
owed to NF acco

Mailing Address 5661 Fleur Dr

City State ZIP Code
Des Moines IA 50321-2841

Outstanding Balance Beginning This Period

1200.00

Transaction ID: D16550

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

1200.00

2) **TOTALS** This Period (last page this line number only)..... ▶

1200.00

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 152 / 174
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 IOWA DEMOCRATIC PARTY

NAME OF ACCOUNT
 IDP State

DATE OF RECEIPT

M M / D D / Y Y Y Y
 0 7 / 2 3 / 2 0 0 4

TOTAL AMOUNT TRANSFERRED

4700.00

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

4700.00

Transaction ID: T87

ii) **Generic Voter Drive**

Transaction ID:

iii) **Exempt Activities**

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

4700.00

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

4700.00

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 153 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Byers Mowing Service

Mailing Address

1103 Lewis Ave

City

State

Zip Code

Des Moines

IA

50315-3452

Purpose of Disbursement:

Lawn mowing

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 09 / 2004

Transaction ID: D1874H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

30.60

54.40

85.00

B. Full Name (Last, First, Middle Initial)

Byers Mowing Service

Mailing Address

1103 Lewis Ave

City

State

Zip Code

Des Moines

IA

50315-3452

Purpose of Disbursement:

Lawn mowing

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 13 / 2004

Transaction ID: D1881H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

36.00

64.00

100.00

C. Full Name (Last, First, Middle Initial)

Burlington Hawkeye

Mailing Address

PO Box 10

City

State

Zip Code

Burlington

IA

52601-0010

Purpose of Disbursement:

Employment ad

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 13 / 2004

Transaction ID: D1880H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.59

59.71

93.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

100.19

178.11

278.30

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 154 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

John A Schmacker

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Mailing Address

3724 Hunter Ave

City

State

Zip Code

Des Moines

IA

50311-2713

Purpose of Disbursement:

Airfare - Boston

Category/
Type

Activity or Event Identifier:

Administrative

Date

M M

0 7

D D

1 5

Y Y

2 0

0 4

Transaction ID: D1911H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

124.44

221.23

345.67

B. Full Name (Last, First, Middle Initial)

Thrasher Services

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Mailing Address

3012 E 14th St

City

State

Zip Code

Des Moines

IA

50316-1420

Purpose of Disbursement:

Plumbing repairs

Category/
Type

Activity or Event Identifier:

Administrative

Date

M M

0 7

D D

1 3

Y Y

2 0

0 4

Transaction ID: D1892H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

67.92

120.76

188.68

C. Full Name (Last, First, Middle Initial)

United States Postal Service

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Mailing Address

1165 2nd Ave

City

State

Zip Code

Des Moines

IA

50318-9704

Purpose of Disbursement:

Postage

Category/
Type

Activity or Event Identifier:

Administrative

Date

M M

0 7

D D

2 1

Y Y

2 0

0 4

Transaction ID: D1916H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

24.48

43.52

68.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

216.84

385.51

602.35

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 155 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

AT&T

Mailing Address

PO Box 2971

City

State

Zip Code

Omaha

NE

68103-2969

Purpose of Disbursement:
Telephone serviceCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

M M

/

D D

/

Y Y

Y Y

0 7

1 3

2 0

0 4

Transaction ID: D1878H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

76.92

136.76

213.68

B. Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address

PO Box 8077

City

State

Zip Code

London

KY

40742

Purpose of Disbursement:
Cell phone serviceCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

M M

/

D D

/

Y Y

Y Y

0 7

1 3

2 0

0 4

Transaction ID: D1891H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

28.24

50.22

78.46

C. Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address

PO Box 8077

City

State

Zip Code

London

KY

40742

Purpose of Disbursement:
Cell phone serviceCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

M M

/

D D

/

Y Y

Y Y

0 7

2 3

2 0

0 4

Transaction ID: D1927H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

24.64

43.81

68.45

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

129.80

230.79

360.59

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 156 / 174
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

United Parcel Service

Mailing Address

PO Box 577

City

State

Zip Code

Carol Stream

IL

60132-0001

Purpose of Disbursement:

Shipping

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 30 / 2004

Transaction ID: D1934H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

211.49

375.99

587.48

B. Full Name (Last, First, Middle Initial)

United Parcel Service

Mailing Address

PO Box 577

City

State

Zip Code

Carol Stream

IL

60132-0001

Purpose of Disbursement:

Shipping

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 23 / 2004

Transaction ID: D1928H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

291.63

518.46

810.09

C. Full Name (Last, First, Middle Initial)

United Parcel Service

Mailing Address

PO Box 577

City

State

Zip Code

Carol Stream

IL

60132-0001

Purpose of Disbursement:

Shipping

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 16 / 2004

Transaction ID: D1914H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

47.86

85.08

132.94

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

550.98

979.53

1530.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 157 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)
 IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Treasurer, State of Iowa

Mailing Address
 PO Box 10412

City State Zip Code
 Des Moines IA 50306-0412

Purpose of Disbursement:
 State sales tax

Category/
 Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 0 7 / 3 0 / 2 0 0 4

Transaction ID: D1933H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 123.34 | | 219.27 | | 342.61 |

B. Full Name (Last, First, Middle Initial)
 Mid American Energy

Mailing Address
 PO Box 8020

City State Zip Code
 Davenport IA 52808-8020

Purpose of Disbursement:
 Utilities

Category/
 Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 0 7 / 0 6 / 2 0 0 4

Transaction ID: D1869H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 654.09 | | 1162.83 | | 1816.92 |

C. Full Name (Last, First, Middle Initial)
 Mid American Energy

Mailing Address
 PO Box 8020

City State Zip Code
 Davenport IA 52808-8020

Purpose of Disbursement:
 Utilities

Category/
 Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 0 7 / 1 3 / 2 0 0 4

Transaction ID: D1884H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 337.97 | | 600.83 | | 938.80 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1115.40 | | 1982.93 | | 3098.33 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

| | |
|-------------------------|-----------|
| PAGE | 158 / 174 |
| FOR LINE 21a OF FORM 3X | |

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address

PO Box 25506

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Lehigh Valley | PA | 18002 |

Purpose of Disbursement:
Cell phone serviceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 1 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1896H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

367.26

652.91

1020.17

B. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address

PO Box 25506

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Lehigh Valley | PA | 18002 |

Purpose of Disbursement:
Cell phone serviceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 1 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1895H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

48.95

87.02

135.97

C. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address

PO Box 25506

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Lehigh Valley | PA | 18002 |

Purpose of Disbursement:
Cell phone serviceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 1 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1897H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

40.18

71.43

111.61

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

456.39

811.36

1267.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 159 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address
 1198 White St

City State Zip Code
 Dubuque IA 52001-5036

Purpose of Disbursement:
 Voice mail deposit

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 0 7 / 2 3 / 2 0 0 4

Transaction ID: D1926H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 18.00 | | 32.00 | | 50.00 |

B. Full Name (Last, First, Middle Initial)
 Scott County Democratic Central Commit

Mailing Address
 3330 Tremont

City State Zip Code
 Davenport IA 52803

Purpose of Disbursement:
 Office rent

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 0 7 / 0 1 / 2 0 0 4

Transaction ID: D1866H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 162.00 | | 288.00 | | 450.00 |

C. Full Name (Last, First, Middle Initial)
 Waste Connections

Mailing Address
 Des Moines District 3071 Dept. 1433

City State Zip Code
 Los Angeles CA 90084-1433

Purpose of Disbursement:
 Trash removal

Category/Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 0 7 / 1 5 / 2 0 0 4

Transaction ID: D1912H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 73.96 | | 131.48 | | 205.44 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 253.96 | | 451.48 | | 705.44 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

| | |
|-------------------------|-----------|
| PAGE | 160 / 174 |
| FOR LINE 21a OF FORM 3X | |

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Waste Connections

Mailing Address

Des Moines District 3071 Dept. 1433

| | | |
|-------------|-------|------------|
| City | State | Zip Code |
| Los Angeles | CA | 90084-1433 |

Purpose of Disbursement:
Trash removalCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 15 / 2004

Transaction ID: D1913H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 73.96 | | 131.48 | | 205.44 |

B. Full Name (Last, First, Middle Initial)

Office Max

Mailing Address

5020 SE 14th

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Des Moines | IA | 50320 |

Purpose of Disbursement:
Office suppliesCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 13 / 2004

Transaction ID: D1885H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 262.33 | | 466.39 | | 728.72 |

C. Full Name (Last, First, Middle Initial)

Nathan Zorowski

Mailing Address

219 Ash Ave

| | | |
|------|-------|------------|
| City | State | Zip Code |
| Ames | IA | 50014-7114 |

Purpose of Disbursement:
Mileage allowanceCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

- ☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 27 / 2004

Transaction ID: D1931H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 36.45 | | 64.80 | | 101.25 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 372.74 | | 662.67 | | 1035.41 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 161 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Nathan Zoromski

Mailing Address

219 Ash Ave

City

State

Zip Code

Ames

IA

50014-7114

Purpose of Disbursement:
 Mileage allowance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 09 / 2004

Transaction ID: D1877H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

29.16

51.84

81.00

B. Full Name (Last, First, Middle Initial)
 Nathan Zoromski

Mailing Address

219 Ash Ave

City

State

Zip Code

Ames

IA

50014-7114

Purpose of Disbursement:
 Mileage allowance

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 09 / 2004

Transaction ID: D1876H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.29

12.96

20.25

C. Full Name (Last, First, Middle Initial)
 Universal Map

Mailing Address

PO Box 15

City

State

Zip Code

Williamston

MI

48895-0015

Purpose of Disbursement:
 Iowa maps

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 13 / 2004

Transaction ID: D1893H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

67.32

119.68

187.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

103.77

184.48

288.25

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 162 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Qwest

Mailing Address

PO Box 91104

City

State

Zip Code

Seattle

WA

98111-9204

Purpose of Disbursement:
Telephone depositCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 23 / 2004

Transaction ID: D1919H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

216.00

384.00

600.00

B. Full Name (Last, First, Middle Initial)

Qwest

Mailing Address

PO Box 91104

City

State

Zip Code

Seattle

WA

98111-9204

Purpose of Disbursement:
Telephone depositCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 15 / 2004

Transaction ID: D1905H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

216.00

384.00

600.00

C. Full Name (Last, First, Middle Initial)

Qwest

Mailing Address

PO Box 91104

City

State

Zip Code

Seattle

WA

98111-9204

Purpose of Disbursement:
Telephone serviceCategory/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 15 / 2004

Transaction ID: D1908H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.19

46.56

72.75

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

458.19

814.56

1272.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 163 / 174
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

 Purpose of Disbursement:
Telephone deposit
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 5 | / | 2 | 0 | 0 | 4 |

Transaction ID: D1906H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 216.00 | | 384.00 | | 600.00 |

B. Full Name (Last, First, Middle Initial)
Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

 Purpose of Disbursement:
Telephone deposit
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 5 | / | 2 | 0 | 0 | 4 |

Transaction ID: D1904H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 216.00 | | 384.00 | | 600.00 |

C. Full Name (Last, First, Middle Initial)
Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

 Purpose of Disbursement:
Telephone service
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 5 | / | 2 | 0 | 0 | 4 |

Transaction ID: D1907H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 90.99 | | 161.76 | | 252.75 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 522.99 | | 929.76 | | 1452.75 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 164 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Telephone service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 2 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1920H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 42.84 | | 76.16 | | 119.00 |

B. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Telephone service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 1 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1886H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 43.80 | | 77.87 | | 121.67 |

C. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Telephone service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 1 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1889H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 2.43 | | 4.33 | | 6.76 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 89.07 | | 158.36 | | 247.43 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 165 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Telephone service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 1 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1888H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 633.85 | | 1126.84 | | 1760.69 |

B. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Telephone service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 1 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1887H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 434.42 | | 772.31 | | 1206.73 |

C. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Telephone service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 1 | 5 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1903H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 90.99 | | 161.76 | | 252.75 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 1159.26 | | 2060.91 | | 3220.17 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | | | |
|---------------|--|------------------|--|--------------|
| FEDERAL SHARE | | NONFEDERAL SHARE | | TOTAL AMOUNT |
| | | | | |

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 166 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Voice mail deposit

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 2 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1921H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 18.00 | | 32.00 | | 50.00 |

B. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Voice mail deposit

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 2 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1922H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 18.00 | | 32.00 | | 50.00 |

C. Full Name (Last, First, Middle Initial)
 Qwest

Mailing Address

PO Box 91104

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Seattle | WA | 98111-9204 |

Purpose of Disbursement:
 Voice mail deposit

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date

| | |
|---|---|
| M | M |
| 0 | 7 |

 /

| | |
|---|---|
| D | D |
| 2 | 3 |

 /

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 4 |

Transaction ID: D1924H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 18.00 | | 32.00 | | 50.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 54.00 | | 96.00 | | 150.00 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 167 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Qwest

Mailing Address

PO Box 91104

City

State

Zip Code

Seattle

WA

98111-9204

Purpose of Disbursement:

Voice mail deposit

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 23 / 2004

Transaction ID: D1925H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

18.00

32.00

50.00

B. Full Name (Last, First, Middle Initial)

James D Boyd

Mailing Address

2920 Kingman Blvd

City

State

Zip Code

Des Moines

IA

50311-3913

Purpose of Disbursement:

Cleaning service

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 13 / 2004

Transaction ID: D1879H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

162.43

288.76

451.19

C. Full Name (Last, First, Middle Initial)

Carroll County State Bank

Mailing Address

PO Box 5014

City

State

Zip Code

Richmond

CA

94805-0014

Purpose of Disbursement:

Airtfares and lodging

Category/
Type

Activity or Event Identifier:

Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 26 / 2004

Transaction ID: D1929H4

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1291.33

2295.71

3587.04

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1471.76

2616.47

4088.23

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 168 / 174
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Qwest

Mailing Address

1416 W 16th St Ste 103

 City State Zip Code
Davenport IA 52804-3652

 Purpose of Disbursement:
Voice mail deposit
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 0 4

Transaction ID: D1923H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 18.00 | | 32.00 | | 50.00 |

B. Full Name (Last, First, Middle Initial)
Qwest Business

Mailing Address

PO Box 856169

 City State Zip Code
Louisville KY 40285-6169

 Purpose of Disbursement:
Telephone service
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 0 4

Transaction ID: D1930H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 31.69 | | 56.34 | | 88.03 |

C. Full Name (Last, First, Middle Initial)
GB Holdings LLC

Mailing Address

1198 White St

 City State Zip Code
Dubuque IA 52001-5036

 Purpose of Disbursement:
Office rent
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date M M / D D / Y Y Y Y
0 7 / 1 5 / 2 0 0 4

Transaction ID: D1901H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 144.00 | | 256.00 | | 400.00 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 193.69 | | 344.34 | | 538.03 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 169 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Smith's Sewer Service

Mailing Address

PO Box 351

City

State

Zip Code

Johnston

IA

50131-0351

Purpose of Disbursement:
 Plumbing repairs

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 07 / 13 / 2004

Transaction ID: D1890H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

48.08

85.48

133.56

B. Full Name (Last, First, Middle Initial)
 Mediacom

Mailing Address

PO Box 94310

City

State

Zip Code

Palatine

IL

60094-4310

Purpose of Disbursement:
 Cable TV service

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 07 / 08 / 2004

Transaction ID: D1873H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

21.98

39.08

61.06

C. Full Name (Last, First, Middle Initial)
 Johnson County Democratic Central Comm

Mailing Address

917 Bowery Street

City

State

Zip Code

Iowa City

IA

52240

Purpose of Disbursement:
 Office rent

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date M M / D D / Y Y Y Y
 07 / 01 / 2004

Transaction ID: D1865H4

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

180.00

320.00

500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

250.06

444.56

694.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 170 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
 Feaster, Inc

Mailing Address

PO Box 281 PO Box 281

City State Zip Code
 Grimes IA 50111-0281

Purpose of Disbursement:
 Field Office Rent - 1408 Locust

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 01 / 2004

Transaction ID: D1864H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 720.00 | | 1280.00 | | 2000.00 |

B. Full Name (Last, First, Middle Initial)
 Feaster, Inc

Mailing Address

PO Box 281 PO Box 281

City State Zip Code
 Grimes IA 50111-0281

Purpose of Disbursement:
 Field Office Property Insurance - Locust

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 01 / 2004

Transaction ID: D1863H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 76.32 | | 135.68 | | 212.00 |

C. Full Name (Last, First, Middle Initial)
 Des Moines Waterworks

Mailing Address

2201 George Flagg Pkwy

City State Zip Code
 Des Moines IA 50321-1190

Purpose of Disbursement:
 Water and sewer

Category/
Type

Activity or Event Identifier:
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 13 / 2004

Transaction ID: D1883H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 32.35 | | 57.50 | | 89.85 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 828.67 | | 1473.18 | | 2301.85 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 171 / 174
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)
Sandler, Reiff and Young

Mailing Address

50 E St SE Ste 300

 City State Zip Code
Washington DC 20003-2620

 Purpose of Disbursement:
Legal retainer
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date M M / D D / Y Y Y Y
07 / 15 / 2004

Transaction ID: D1910H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 144.00 | | 256.00 | | 400.00 |

B. Full Name (Last, First, Middle Initial)
Copy Systems

Mailing Address

920 E 21st St

 City State Zip Code
Des Moines IA 50317-5216

 Purpose of Disbursement:
Copy machine maintenance
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date M M / D D / Y Y Y Y
07 / 22 / 2004

Transaction ID: D1917H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 758.86 | | 1349.10 | | 2107.96 |

C. Full Name (Last, First, Middle Initial)
Domino's Pizza

Mailing Address

902 Army Post Road

 City State Zip Code
Des Moines IA 50315

 Purpose of Disbursement:
Catering for volunteer activity
Category/
Type
 Activity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

 Date M M / D D / Y Y Y Y
07 / 22 / 2004

Transaction ID: D1918H4

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 20.01 | | 35.57 | | 55.58 |

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

| | | | | |
|---------------|---|------------------|---|--------------|
| FEDERAL SHARE | + | NONFEDERAL SHARE | = | TOTAL AMOUNT |
| 922.87 | | 1640.67 | | 2563.54 |

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

| | | |
|---------------|------------------|--------------|
| FEDERAL SHARE | NONFEDERAL SHARE | TOTAL AMOUNT |
| | | |

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 172 / 174
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

IOWA DEMOCRATIC PARTY

A. Full Name (Last, First, Middle Initial)

Cedar County Auditor

Mailing Address

Courthouse

City State Zip Code

Tipton IA 52772

Purpose of Disbursement:
Precinct mapsCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 13 / 2004

Transaction ID: D1882H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

18.36

32.64

51.00

B. Full Name (Last, First, Middle Initial)

Cerro Gordo County Democratic Central

Mailing Address

943 6th St SE

City State Zip Code

Mason City IA 50401-4261

Purpose of Disbursement:
Office rentCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 15 / 2004

Transaction ID: D1900H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

72.00

128.00

200.00

C. Full Name (Last, First, Middle Initial)

Cerro Gordo County Democratic Central

Mailing Address

943 6th St SE

City State Zip Code

Mason City IA 50401-4261

Purpose of Disbursement:
Telephone rentalCategory/
TypeActivity or Event Identifier:
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

327762.04

Date 07 / 08 / 2004

Transaction ID: D1872H4

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

43.21

76.82

120.03

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

133.57

237.46

371.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

9384.20

16683.13

26067.33

SCHEDULE L (FEC Form 3X)

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AGGREGATION PAGE: LEVIN FUNDSTransaction ID: **SchedL296**NAME OF COMMITTEE (In Full)
IOWA DEMOCRATIC PARTYNAME OF ACCOUNT
Levin Designations & Expenditures

| | COLUMN A TOTAL THIS PERIOD | COLUMN B YEAR-TO-DATE |
|--|-------------------------------|--------------------------|
| 1. RECEIPTS FROM PERSONS | | |
| a. Itemized..... (Use Schedule L-A) | 0.00 | 10500.00 |
| b. Unitemized..... | 0.00 | 0.00 |
| c. Total..... | 0.00 | 10500.00 |
| 2. OTHER RECEIPTS..... | 0.00 | 5000.00 |
| 3. TOTAL RECEIPTS..... (Add Lines 1c and 2) | 0.00 | 15500.00 |
| 4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B) | | |
| a. Voter Registration..... | 0.00 | 0.00 |
| b. Voter ID..... | 0.00 | 0.00 |
| c. GOTV..... | 0.00 | 0.00 |
| d. Generic Campaign..... | 0.00 | 0.00 |
| e. Total..... | 0.00 | 0.00 |
| 5. OTHER DISBURSEMENTS..... | 0.00 | 70.09 |
| 6. TOTAL DISBURSEMENTS..... (Add Lines 4e and 5) | 0.00 | 70.09 |
| 7. BEGINNING CASH ON HAND..... (for Column B, use cash as of January 1st) | 25329.91 | 9900.00 |
| 8. RECEIPTS..... (from Line 3) | 0.00 | 15500.00 |
| 9. SUBTOTAL..... (Add Lines 7 and 8) | 25329.91 | 25400.00 |
| 10. DISBURSEMENTS..... (From Line 6) | 0.00 | 70.09 |
| 11. ENDING CASH ON HAND..... (Subtract Line 10 From Line 9) | | 25329.91 |

Image# 27930975953

Form/Schedule: **F3XA**

Transaction ID:

Please note that due to an internal audit of 2004 we are making amendments to all our reports through 2007. The receipts identified as 'Individual Unitemized' are from small dollar donors and do not contain contributions from anyone having given more than \$200 in aggregate. Consequently, these contributions are now reflected in the aggregates for Line 11aii.
